Appendix D

Accreditation Quality Improvement Survey Results

Reviewers' Responses

December 2003

Legend & Layout

- Depicted are responses that were answered using a 5-point Likert Scale
- SA & IA represent 'Strongly Agree' and 'Inclined to Agree'
- Neither represents 'Neither Agree nor Disagree'
- SD & ID represent 'Strongly Disagree' and 'Inclined to Disagree'
- Slides follow order of on-line survey

Demog3: Primary Area of Job Responsibility – **Reviewers' Responses**

Pie chart data:
- Accreditation Reviewer: 6
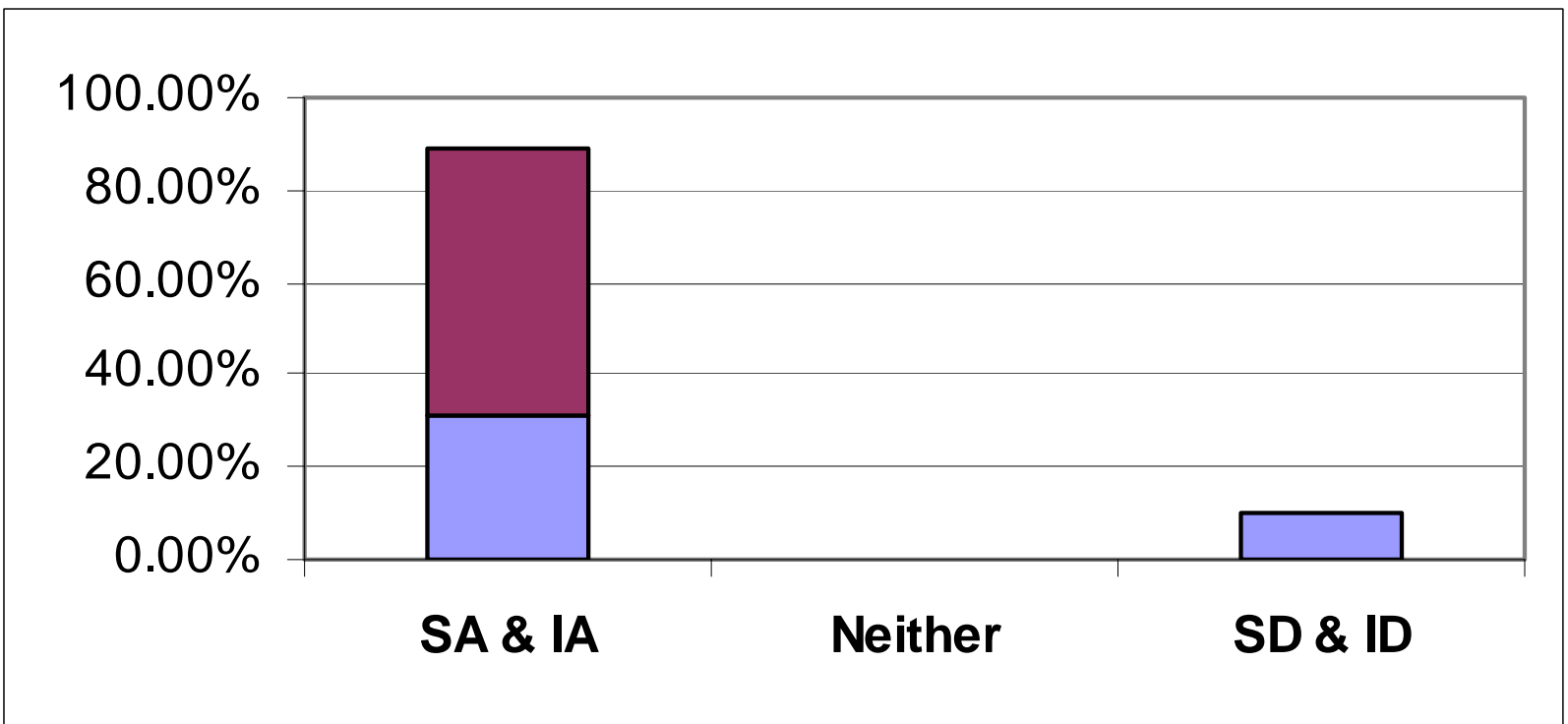- Other: 3
- No Response: 10
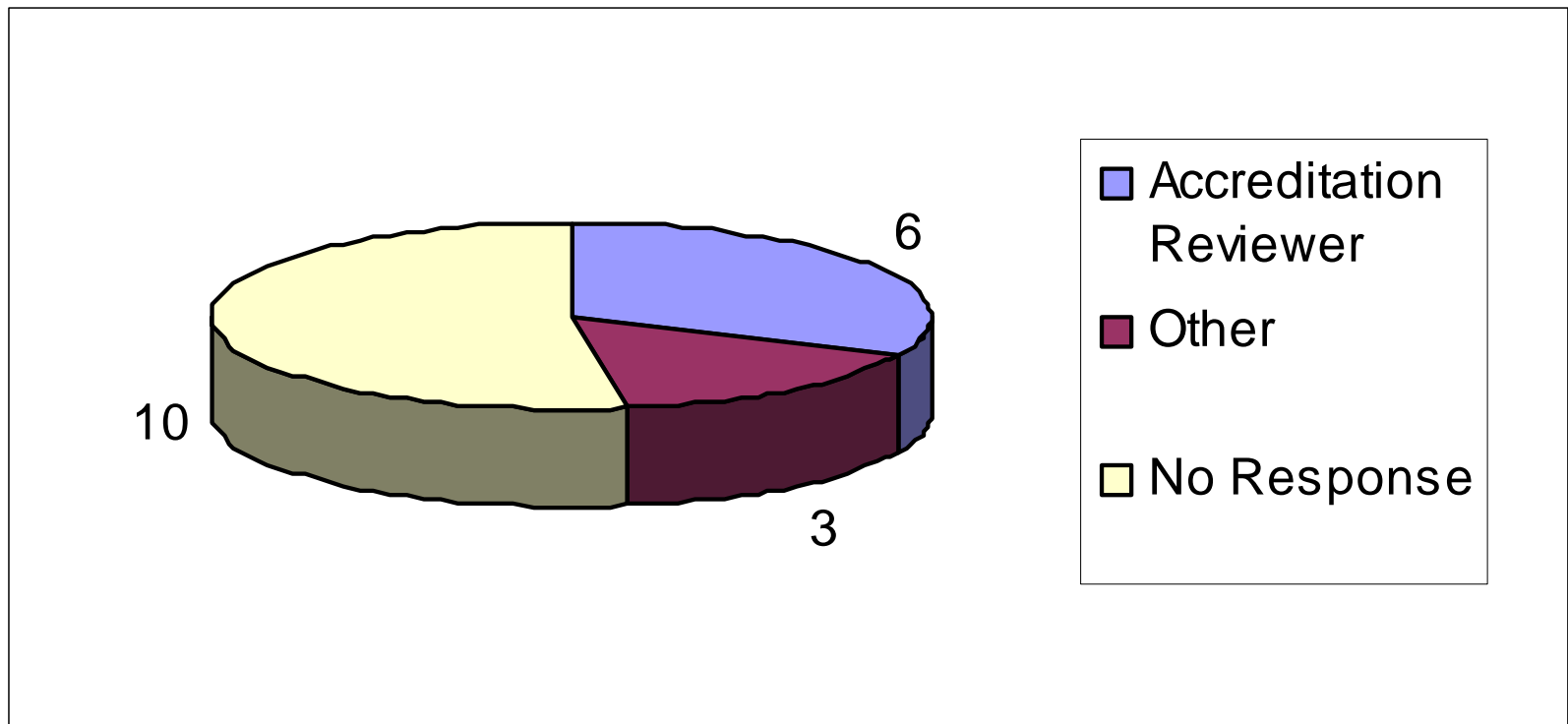
SA1: Self Assessment Useful Tool for Identifying Areas Needing Improvement- **Reviewers' Responses**
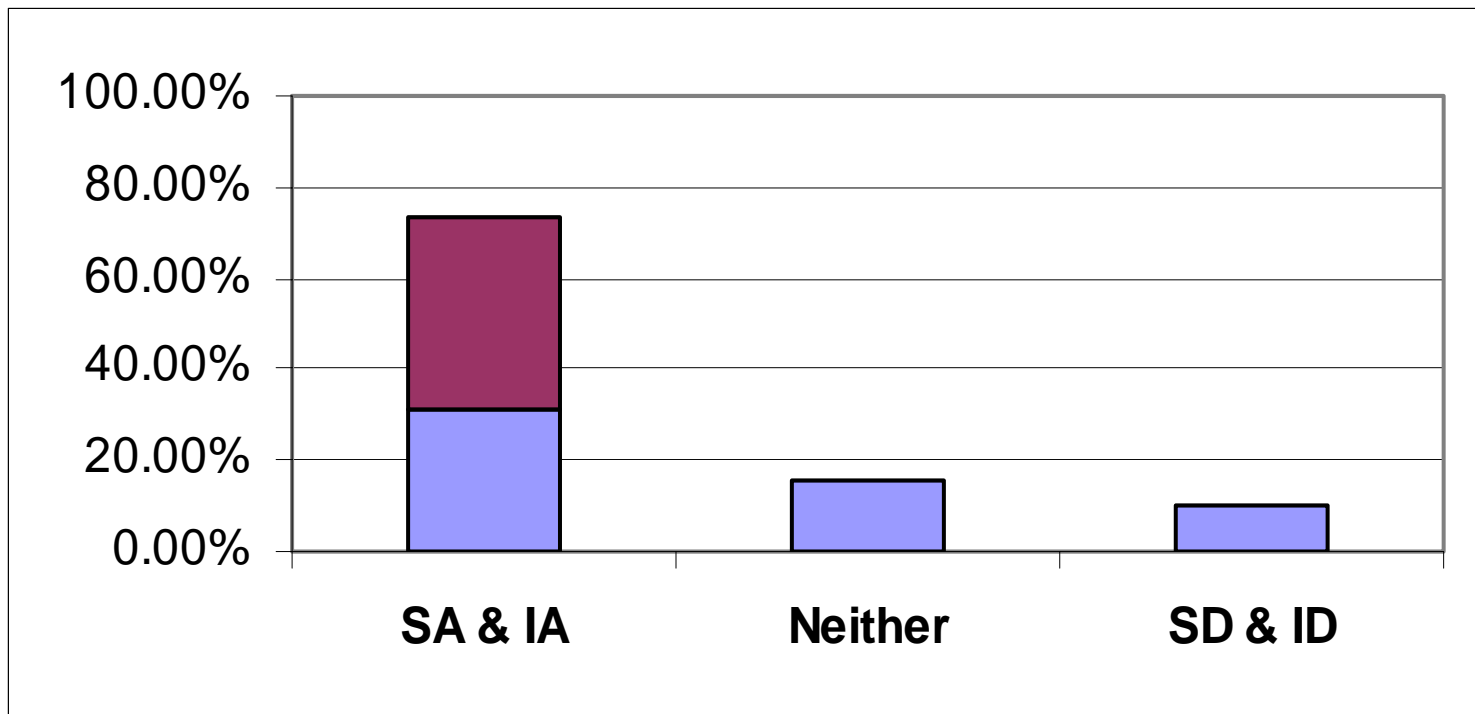
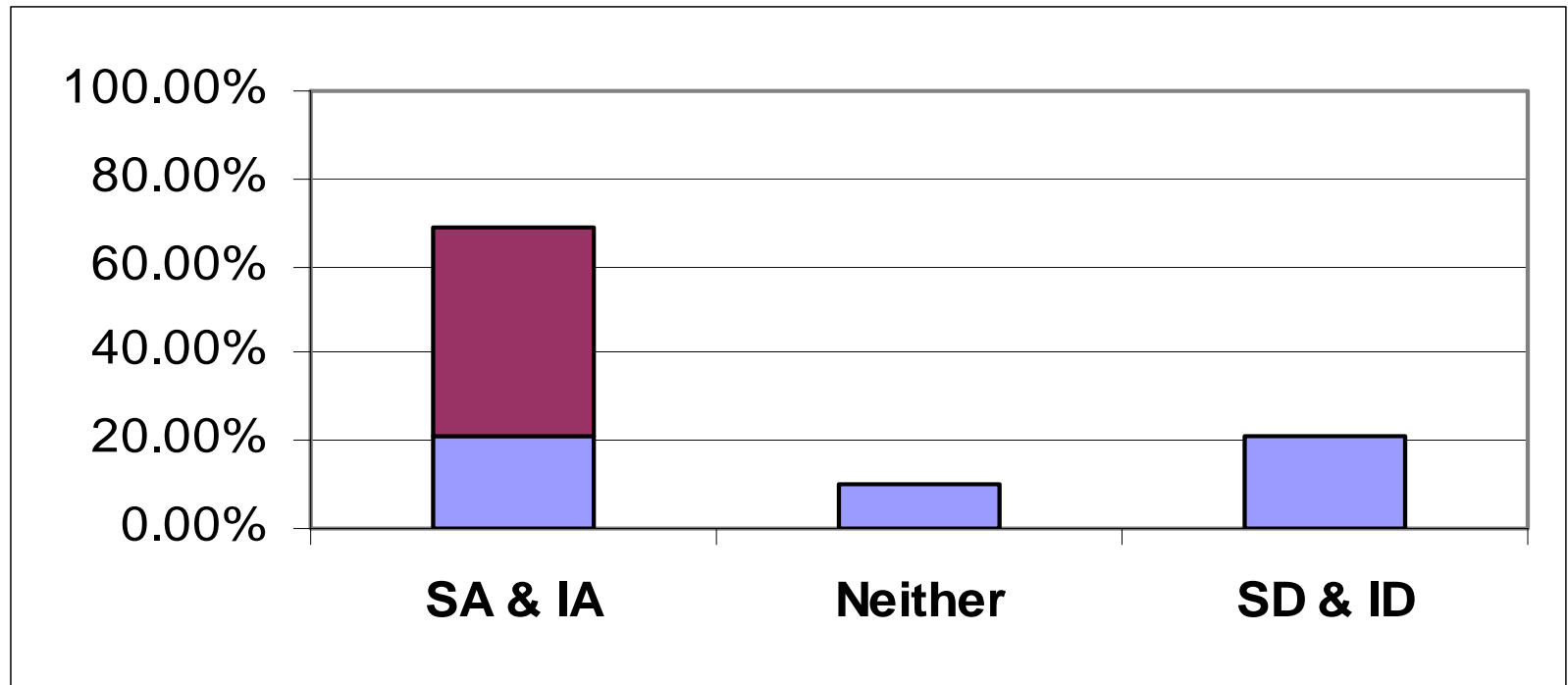N=19, 0 'no response'

SA= 6, IA = 8, Neither = 3, ID =2, ID = 0

4

SA2: Self Assessment Process Useful in Preparing for On-site Review- **Reviewers' Responses**

N=19, 0 'no response'

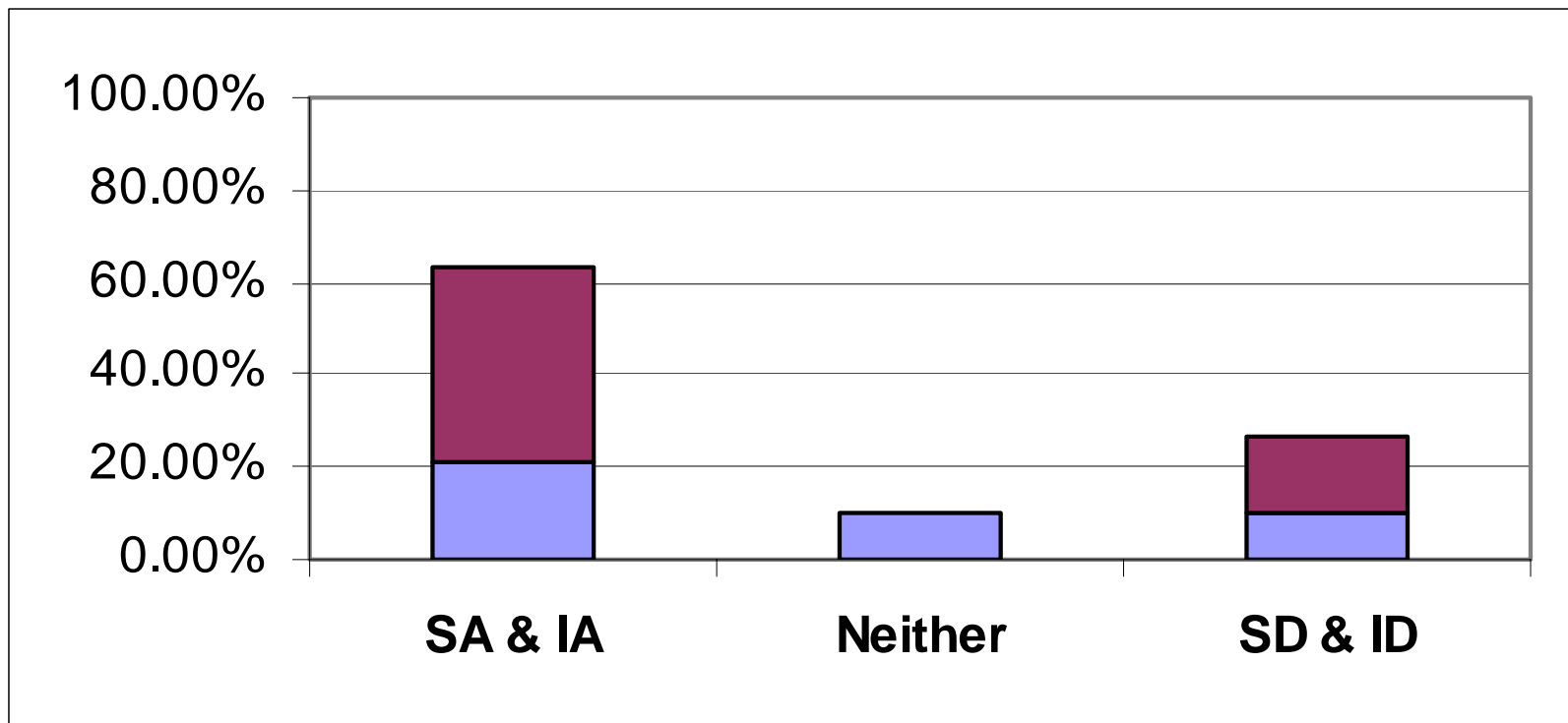SA = 6, IA = 11, Neither = 0, ID = 2, SD = 0

SA3: Self Assessment Process is Catalyst for Pre-review Consultation- **Reviewers' Responses**

N = 19, 0 'no response'

SA = 4, IA = 9, Neither = 2, IA = 4, SD = 0

OSR1: On-site Review Can Be Improved by LPHD Evaluation of State Agency Reviewers- **Reviewers' Responses**
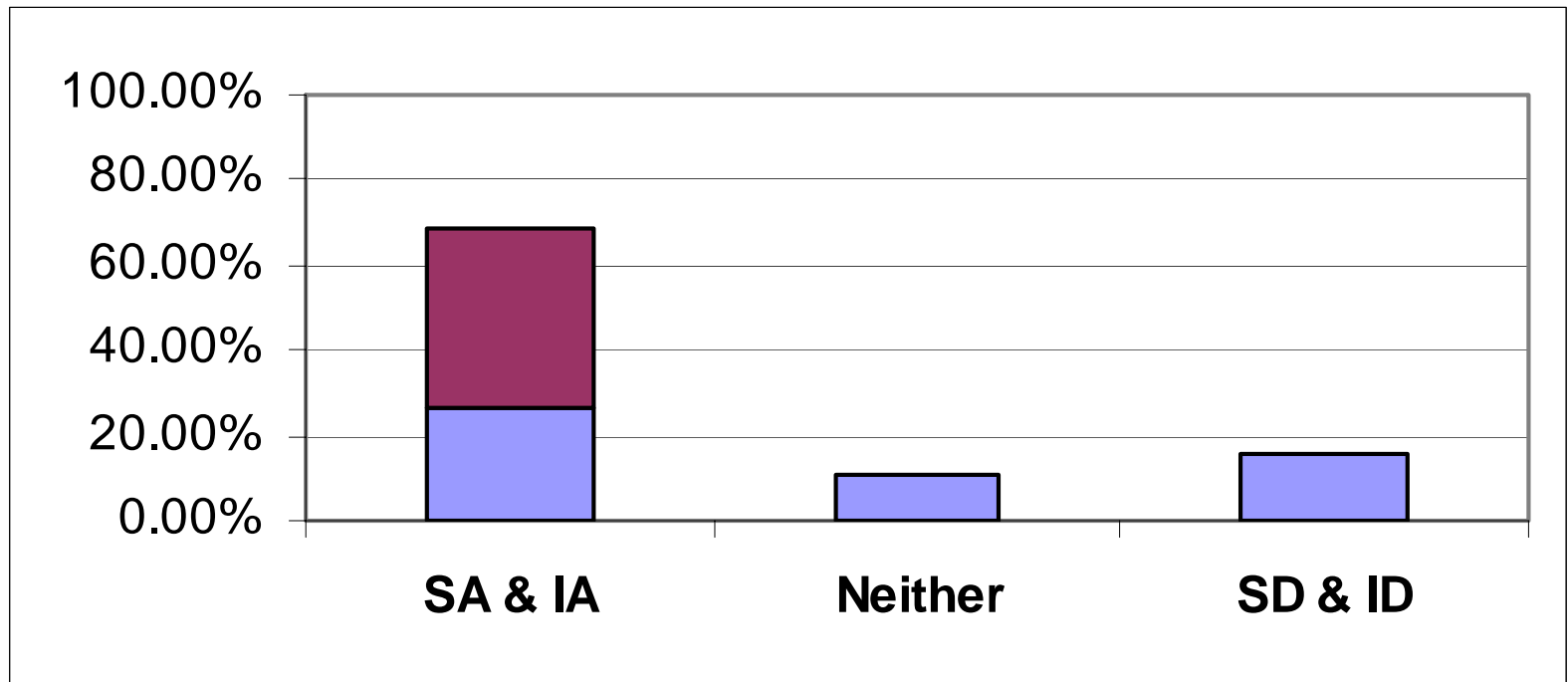

N = 19, 0 'no response'

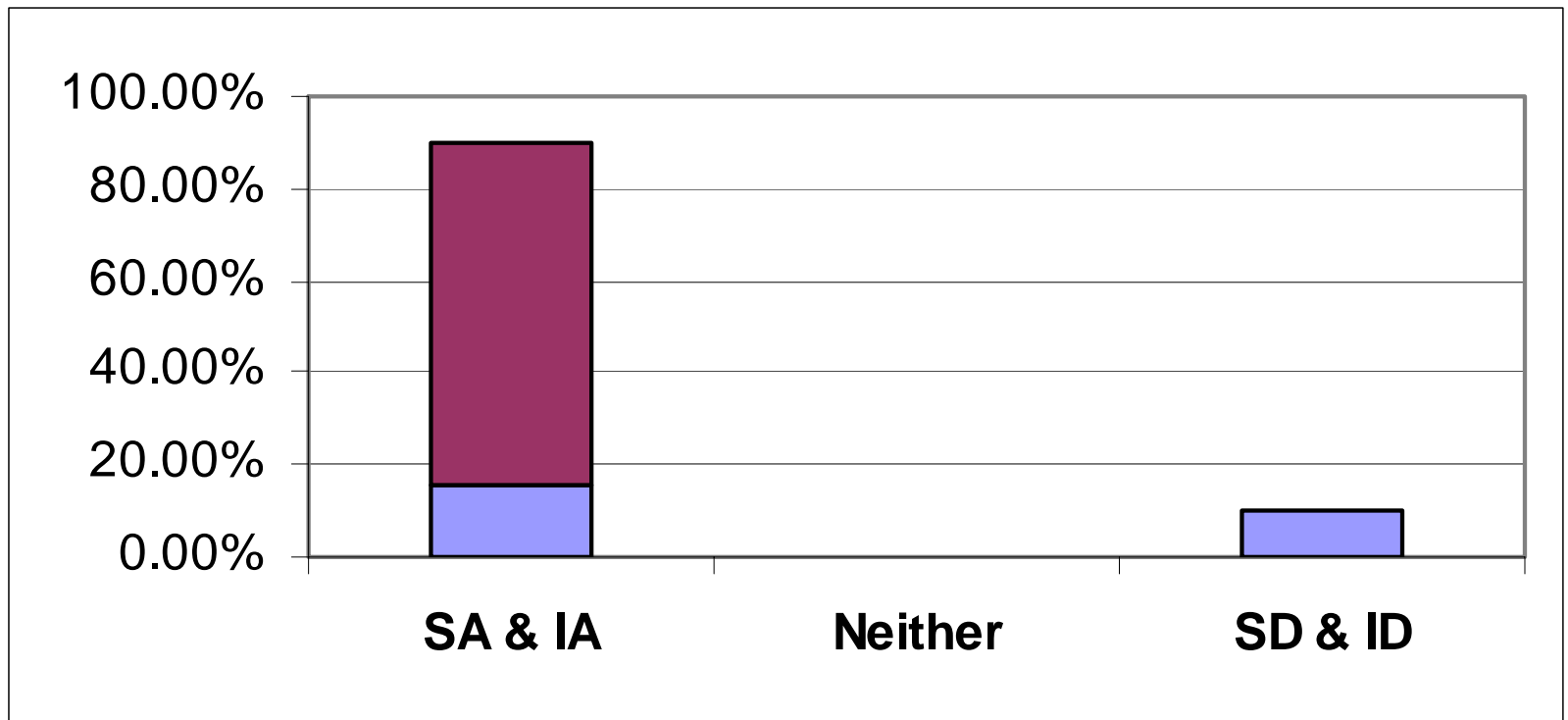SA = 4, IA = 8, Neither = 2, ID = 2, SD = 3

OSR2: On-site Review Process Can Be Improved By Increasing Exit Interviews- **Reviewers' Responses**

N = 18, 1 'no response'

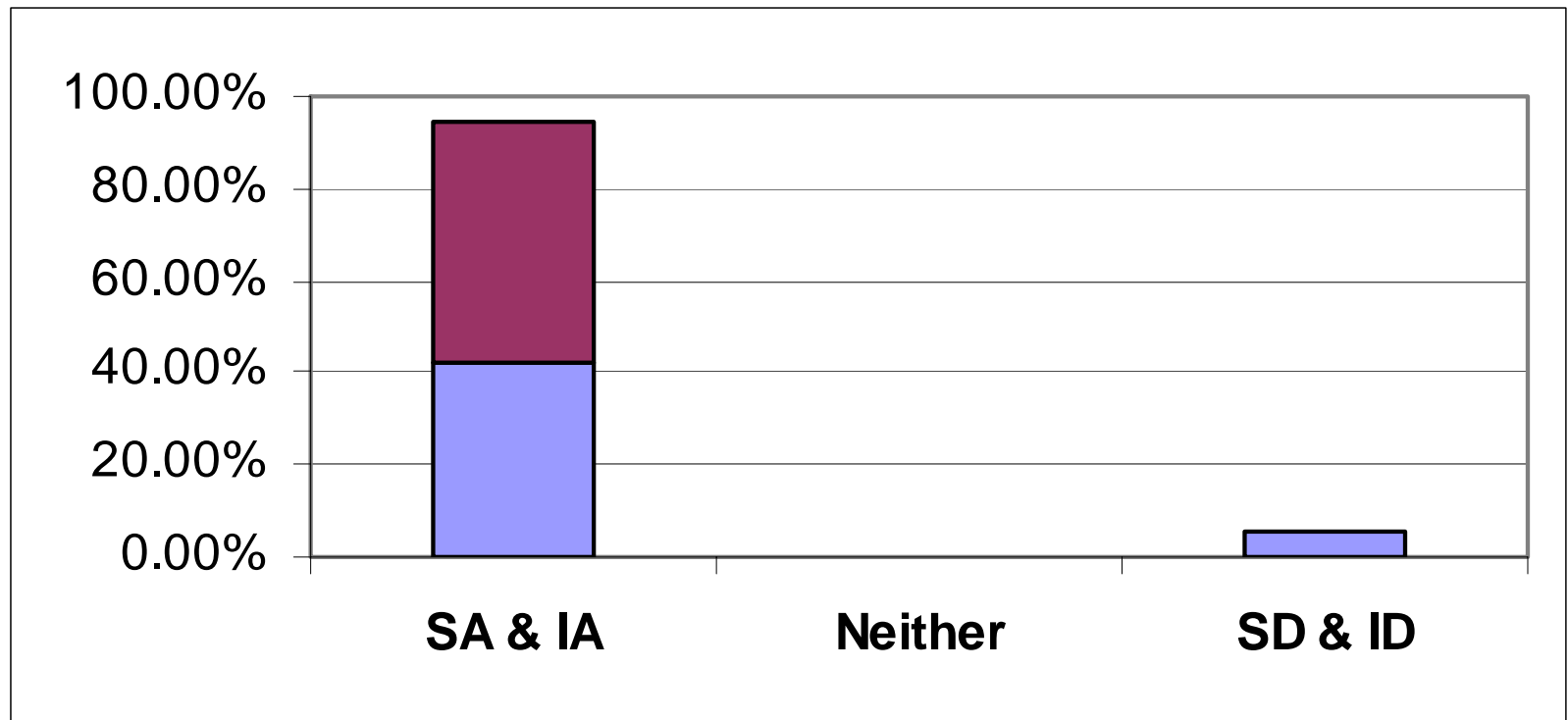SA = 8, IA = 5, Neither = 2, ID = 3, SD = 1

OSR3: On-site Review is Opportunity for Constructive Program Related Dialogue- **Reviewers' Responses**

N = 19, 0 'no response'

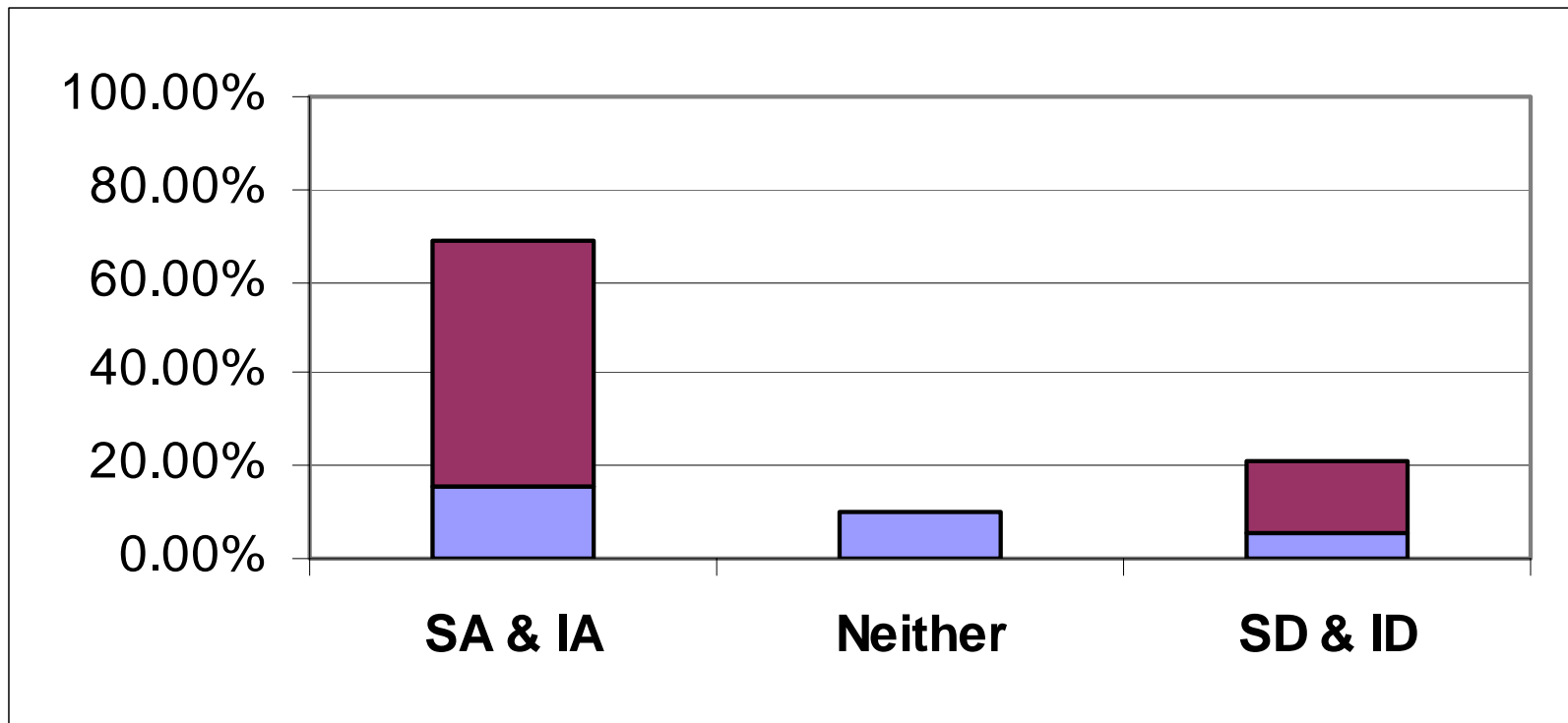SA = 14, IA = 3, Neither = 0, ID = 2, SD = 0

OSR4: Program Reviewers Have Good Understanding of Accreditation Standards-**Reviewers' Responses**

N = 19, 0 'no response'

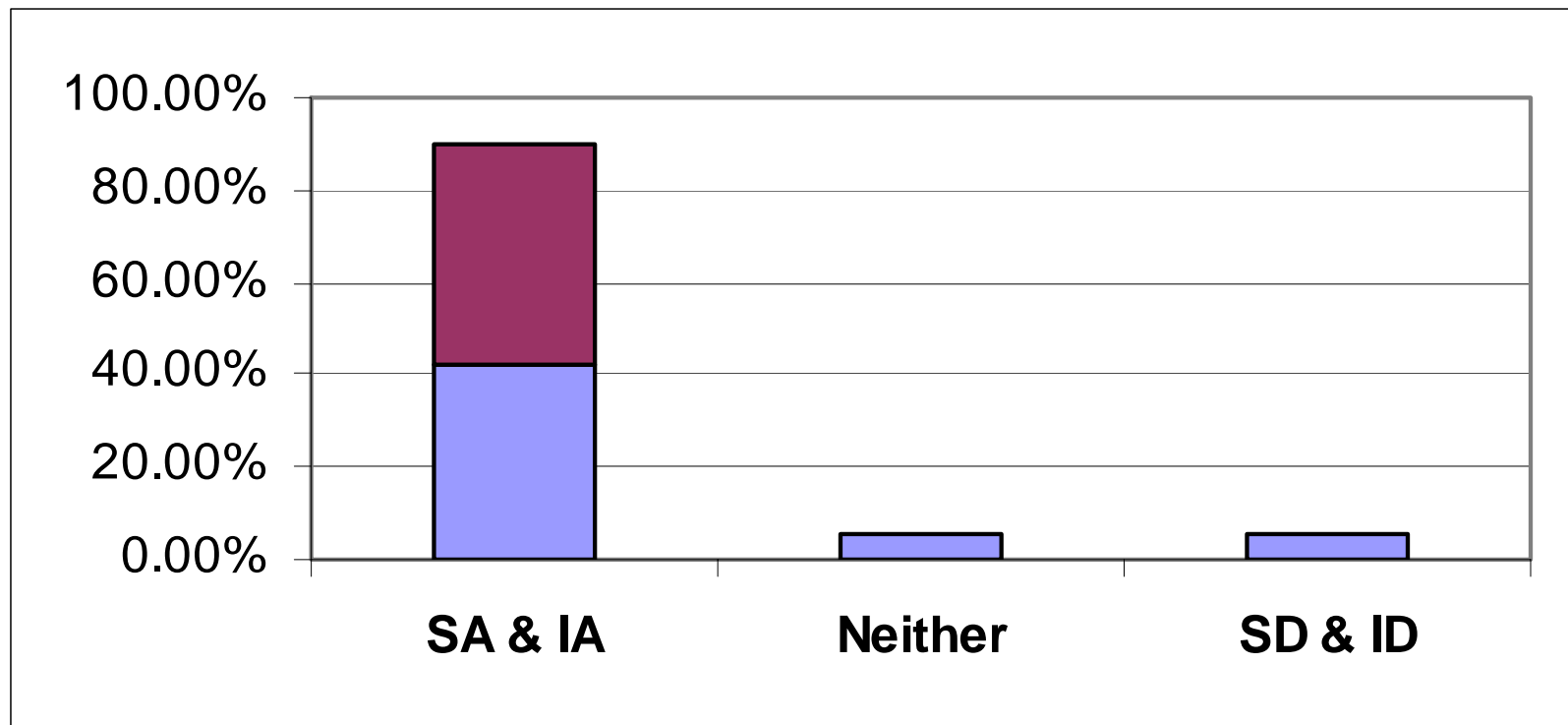SA = 10, IA = 8, Neither = 0, ID = 1, SD = 0

OSR5: All Reviewers Apply Accreditation Standards the Same Way-
Reviewers' Responses

N = 10, 0 'no response'

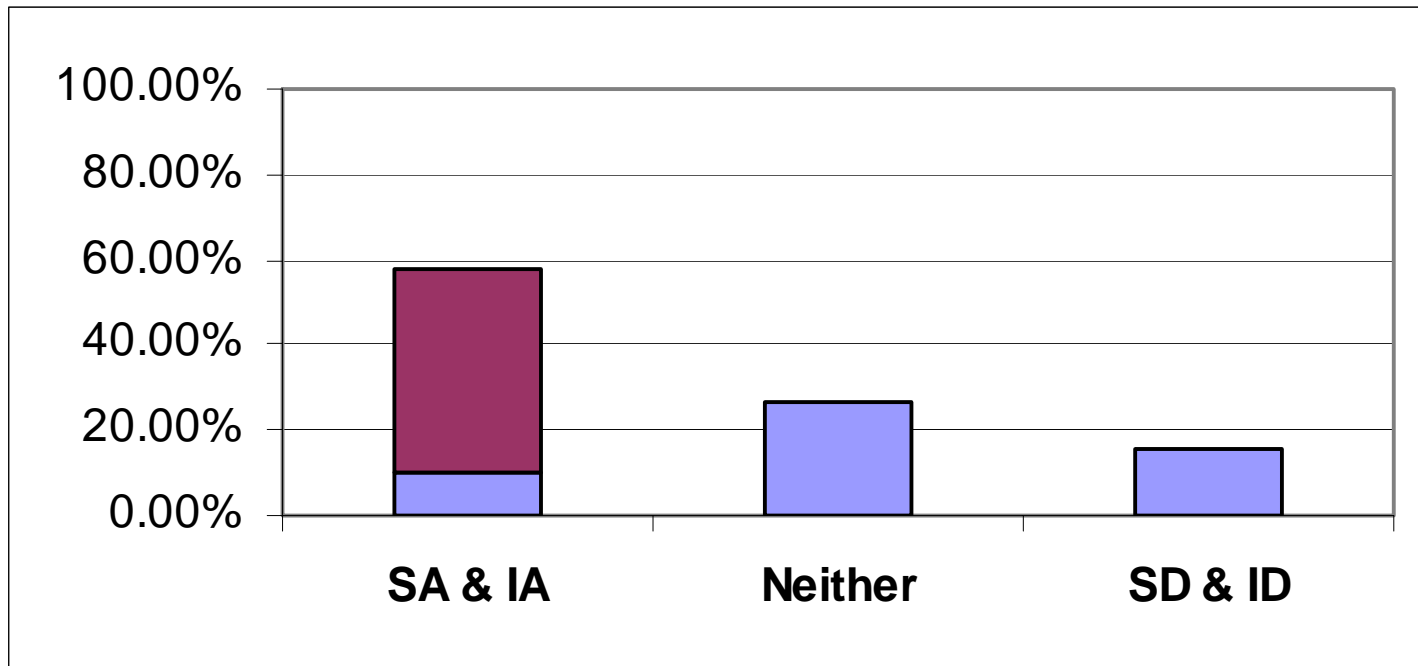SA = 3, IA = 10, Neither = 2, ID = 3, SD = 1

OSR6: Same Program Reviewer Applies Accreditation Standard Same Way at Each LPHD- **Reviewers' Responses**

N = 19, 0 'no response'

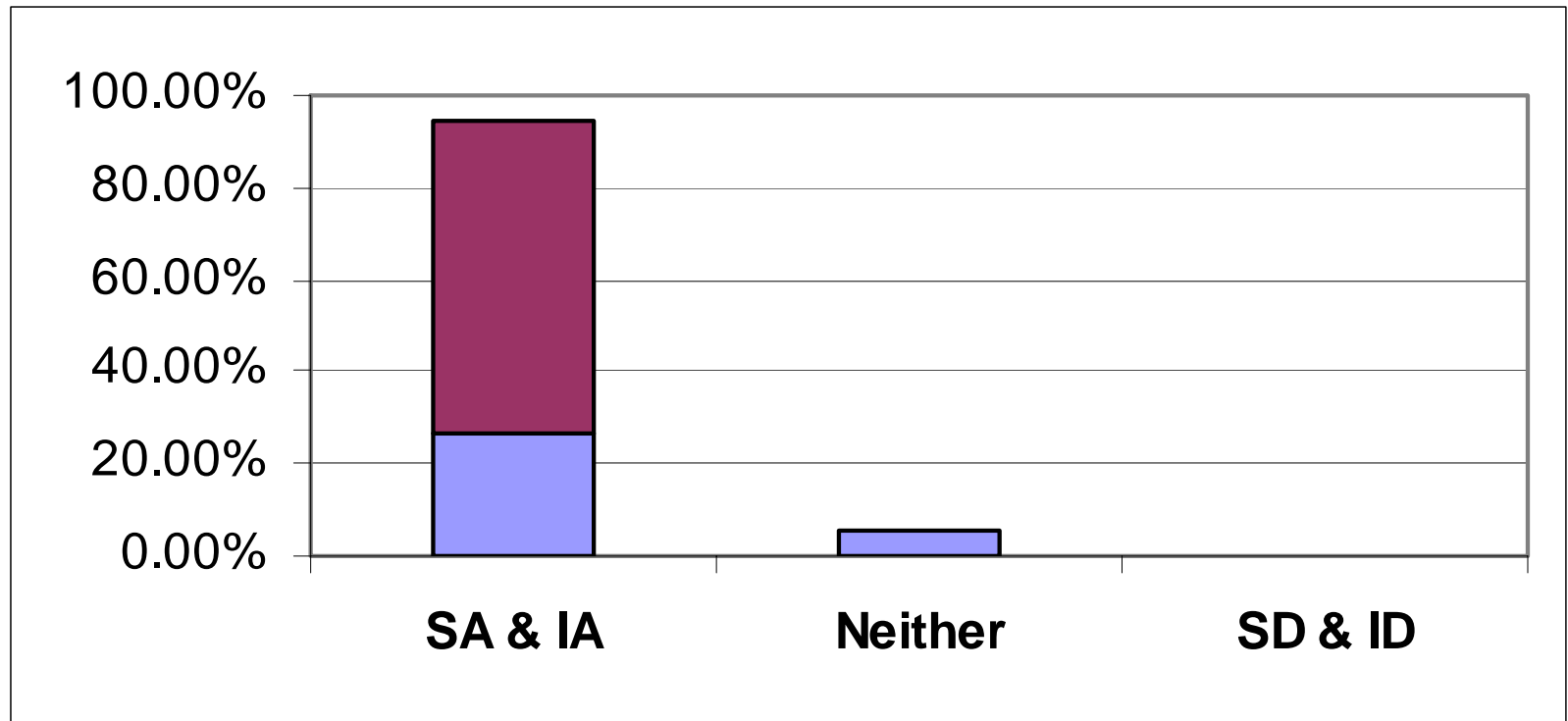SA = 9, IA = 8, Neither = 1, ID = 1, SD = 0

OSR7: Presence of Program Specific Peer Reviewer Would Improve On-Site Review Process- **Reviewers' Responses**

N = 19, 0 'no response'
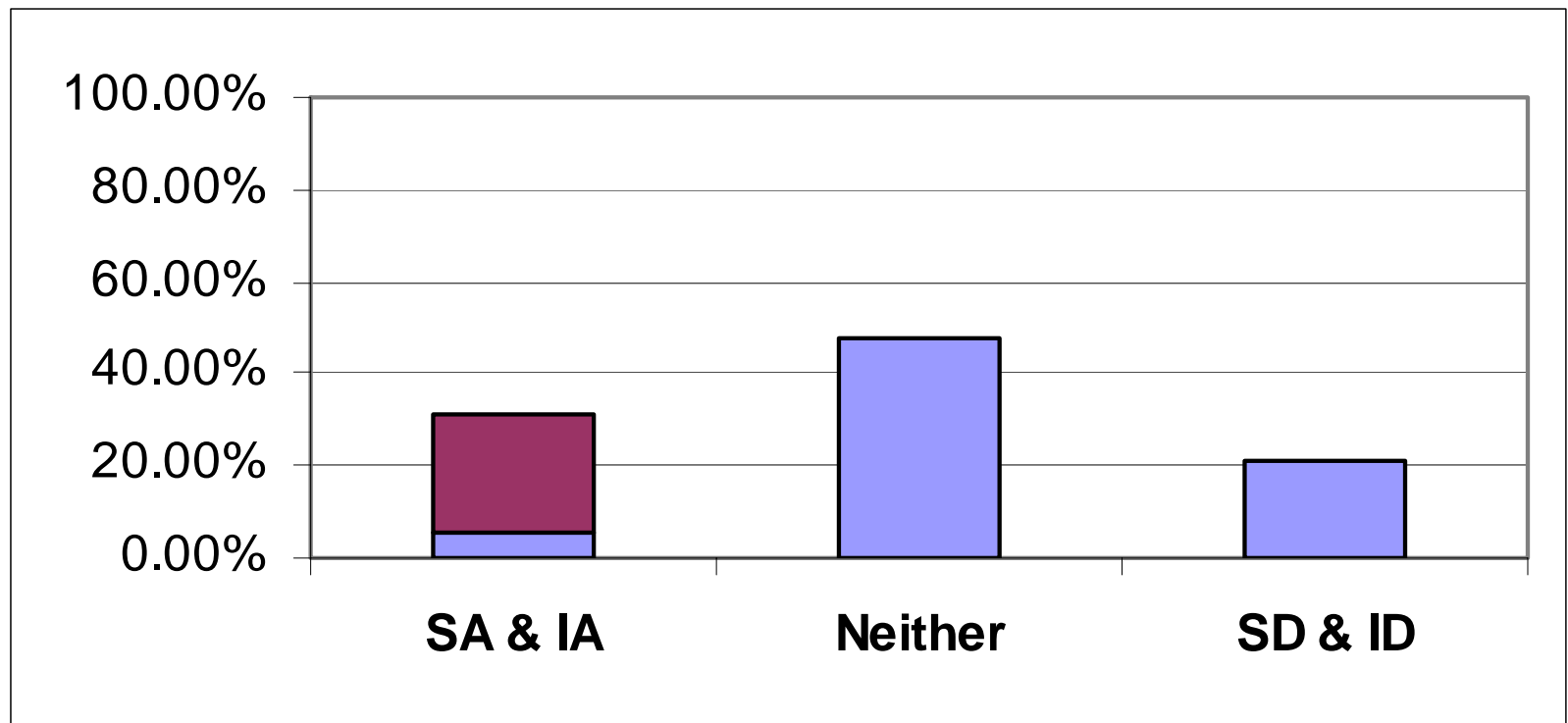
SA = 2, IA = 9, Neither = 5, ID = 3, SD = 0

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OSSR1: On-site Review Report Assists the LPHD As a Tool for Performance Improvement-**Reviewers' Responses**

N = 19, 0 'no response'

SA = 13, IA = 5, Neither = 1, SD & ID = 0

OSSR2: On-site Review Report Would Be Improved By More Use of Special Recognition Section-**Reviewers' Responses**
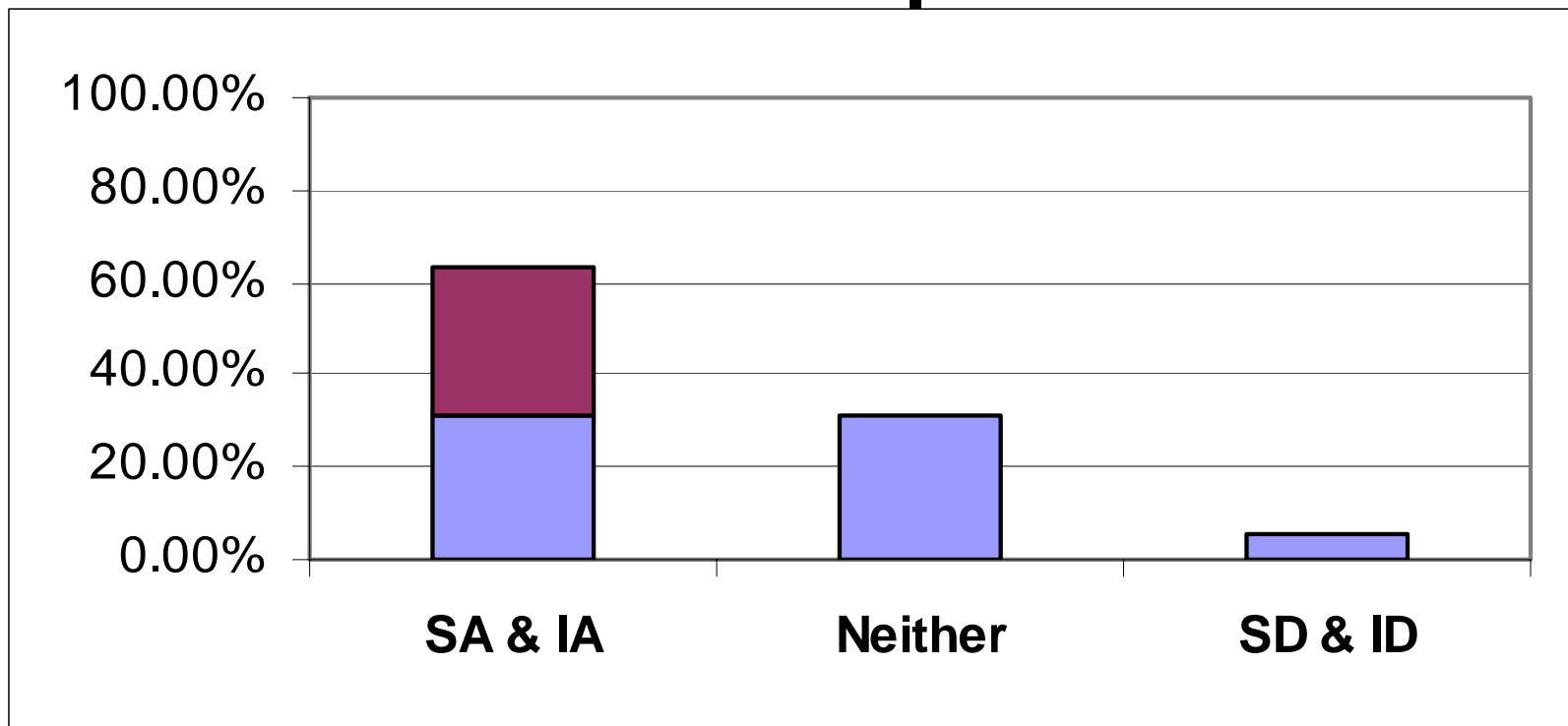

N = 19, 0 'no response'
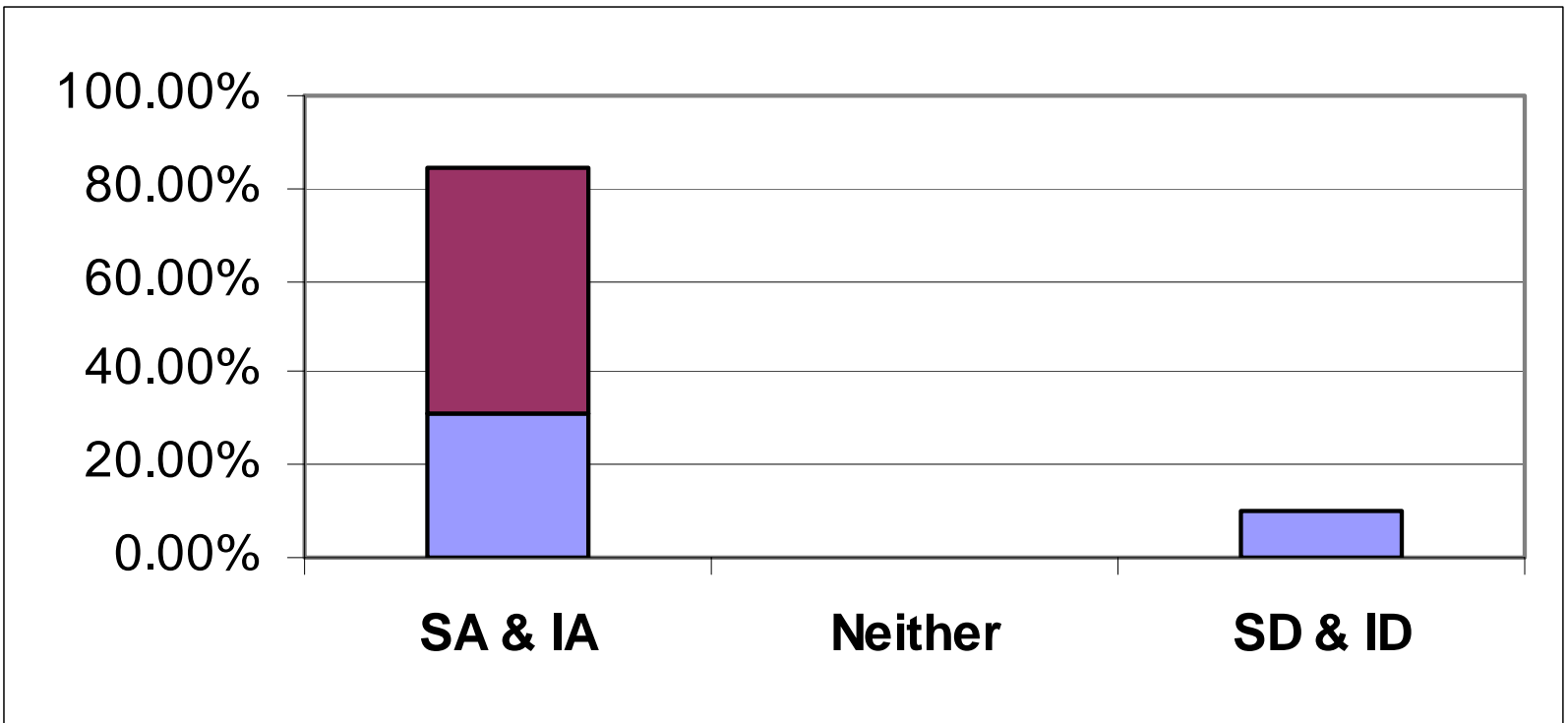
SA = 1, IA = 5, Neither = 9, ID = 4, SD = 0

OSSR3: On-site Review Report Would Be Improved By More Use of Recommendation for Improvement Section-**Reviewers' Responses**

N = 19, 0 'no response'

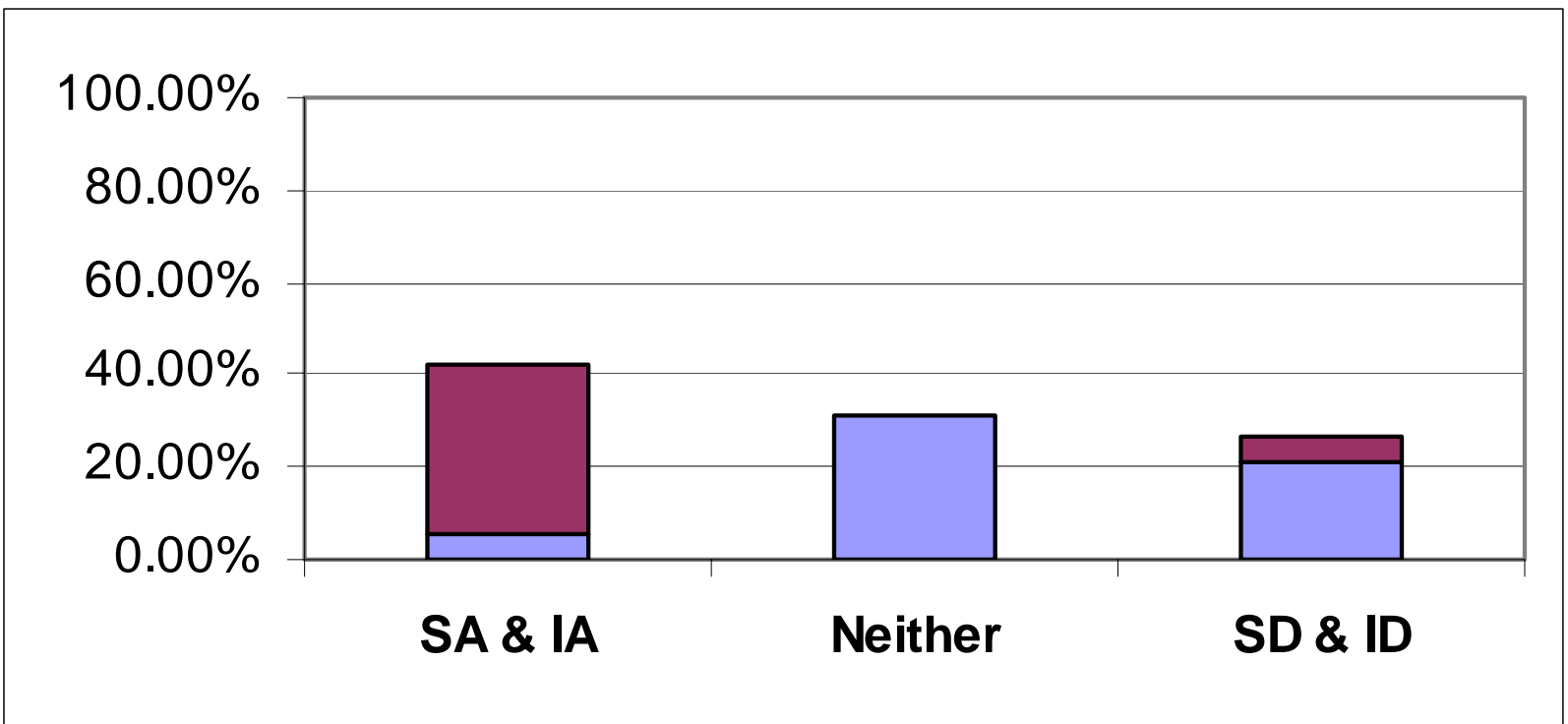SA = 6, IA = 6, Neither = 6, ID = 1, SD = 0

CPA1: Correction Plan of Action Serves As Useful Mechanism for Continuous Improvement- **Reviewers' Responses**

N = 19, 1 'no response'

SA = 6, IA = 10, Neither = 0, ID = 2, SD = 0

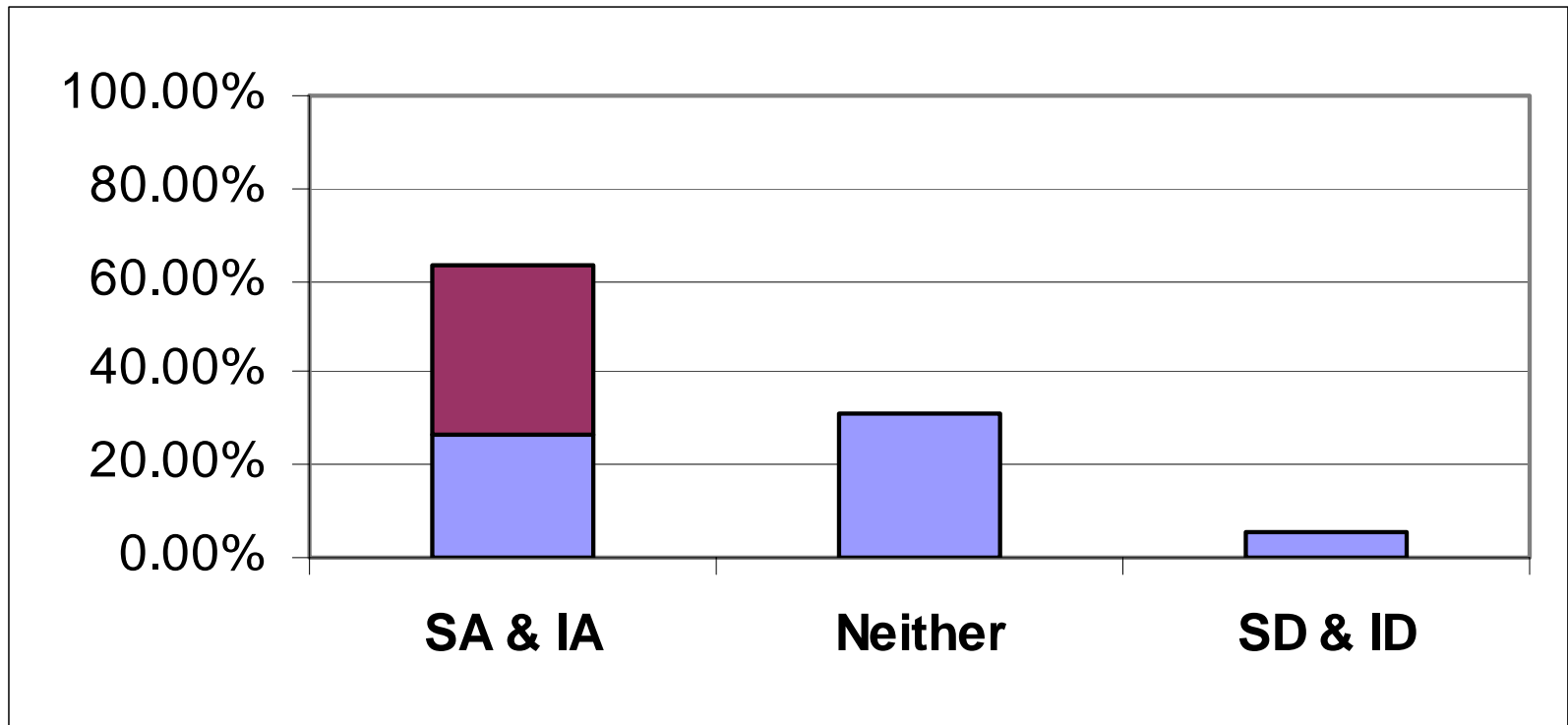# CPA2: CPA Process Can Best Be Improved By a Shorter Time Frame for Implementation- **Reviewers' Responses**

N = 19, 0 'no response'

SA = 1, IA = 7, Neither = 6, ID = 4, SD = 1

18

CPA3: CPA Process Would Benefit From Improved Communication Between Program Reviewers and LPHD Staff- **Reviewers' Responses**
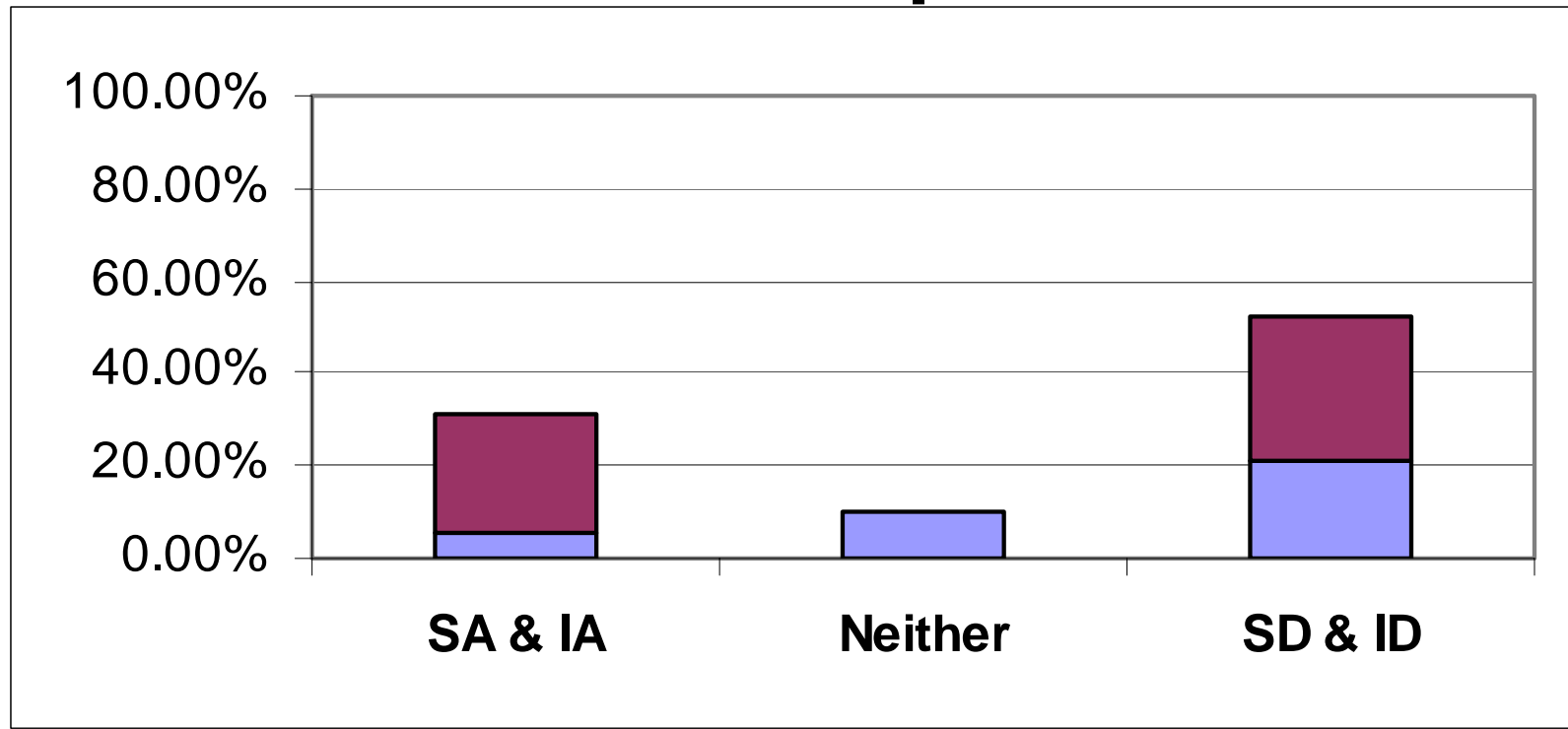

N = 19, 0 'no response'

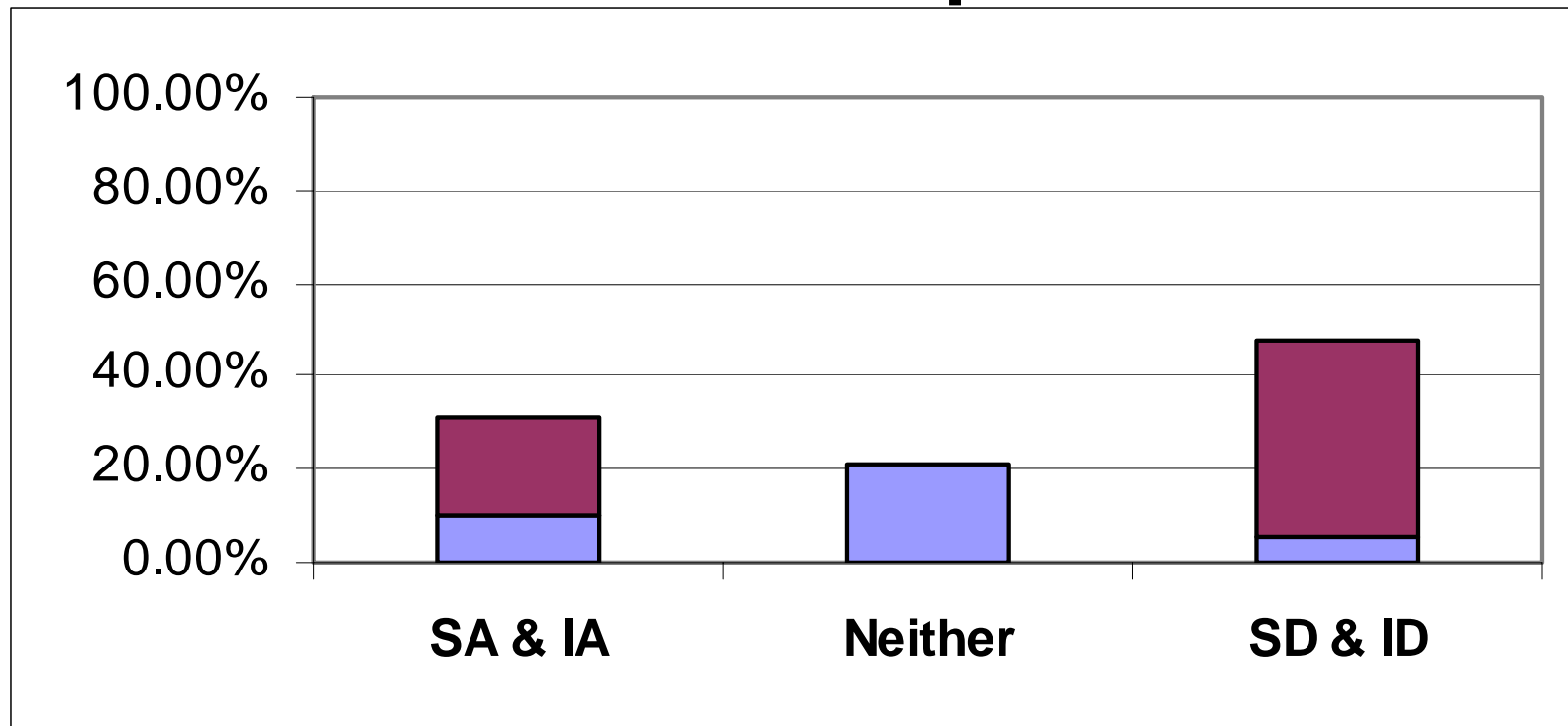SA = 5, IA = 7, Neither = 6, ID = 1, SD = 0

Tool1: Accreditation Tool Should Focus More on Achievable Optimal Performance Standards-**Reviewers' Responses**

N = 18, 1 'no response'

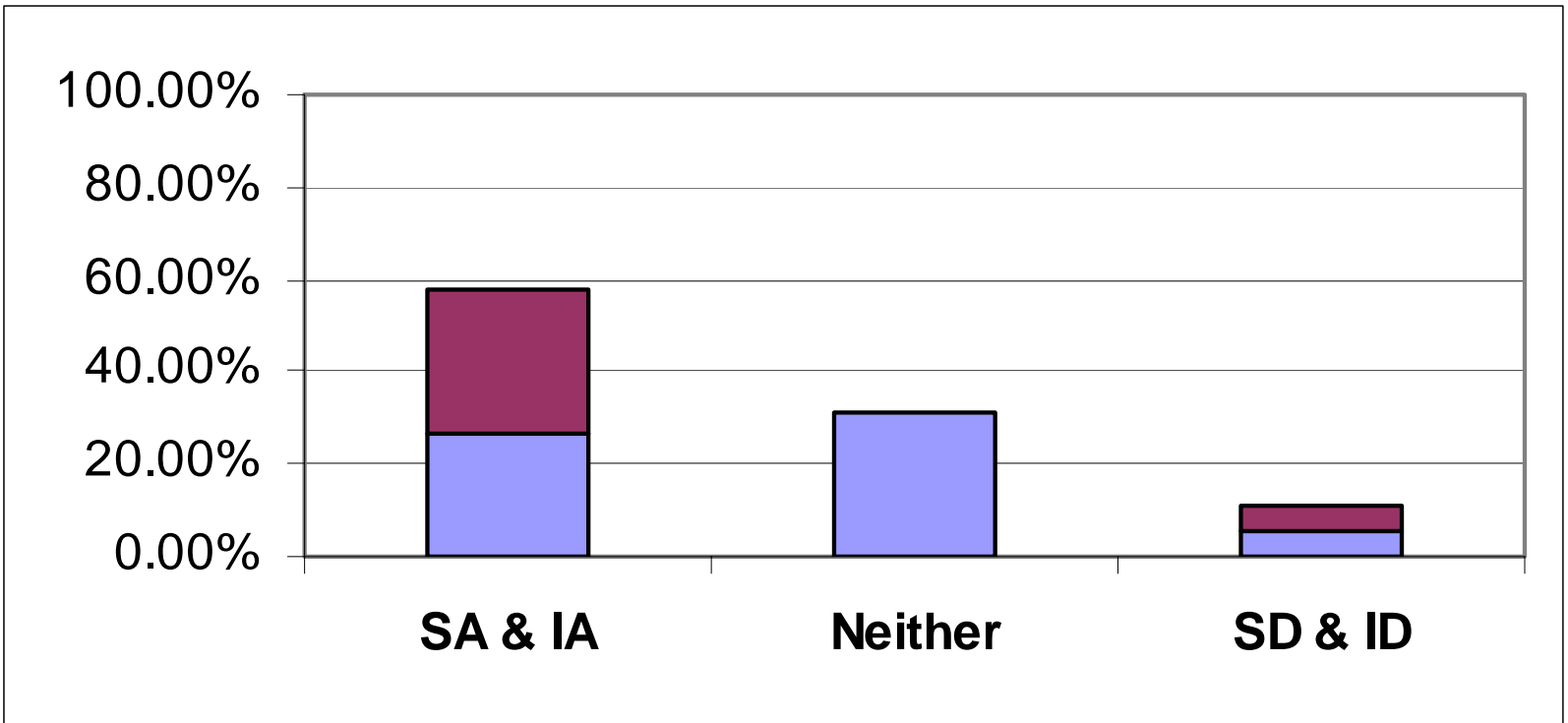SA = 1, IA = 5, Neither = 2, ID = 4, SD = 6

Tool2: "Accreditation with Commendation" is Reflective of Enhanced Program Capacity- **Reviewers' Responses**

N = 19, 0 'no response'

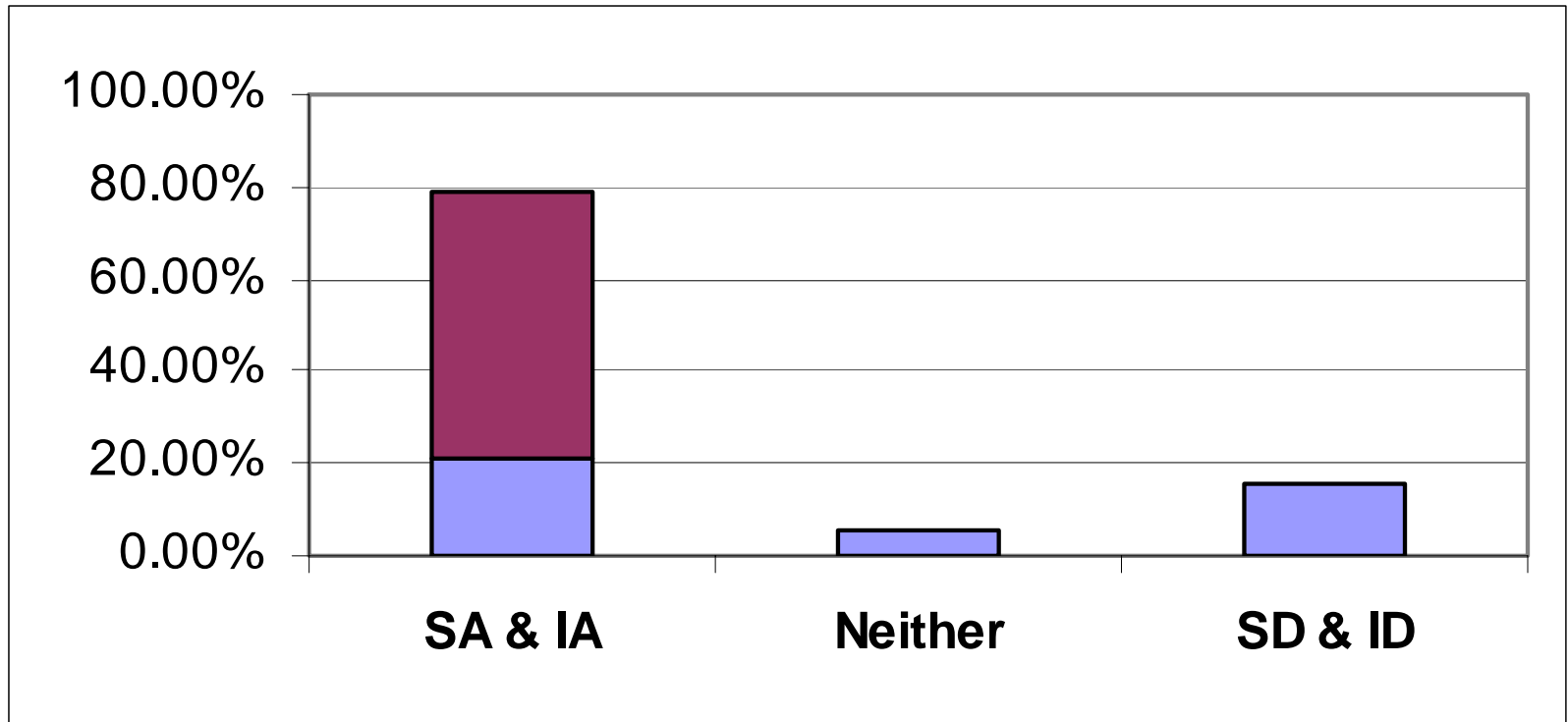SD = 2, IA = 4, Neither = 4, ID = 8, SD = 1

Tool3: Formatting of the Accreditation Tool Meets User Needs- **Reviewers' Responses**

N = 19, 0 'no response'

SA = 5, IA = 6, Neither = 6, ID = 1, SD = 1

Tool4: Standards in the Tool Are Written Clearly and Concisely- **Reviewers' Responses**
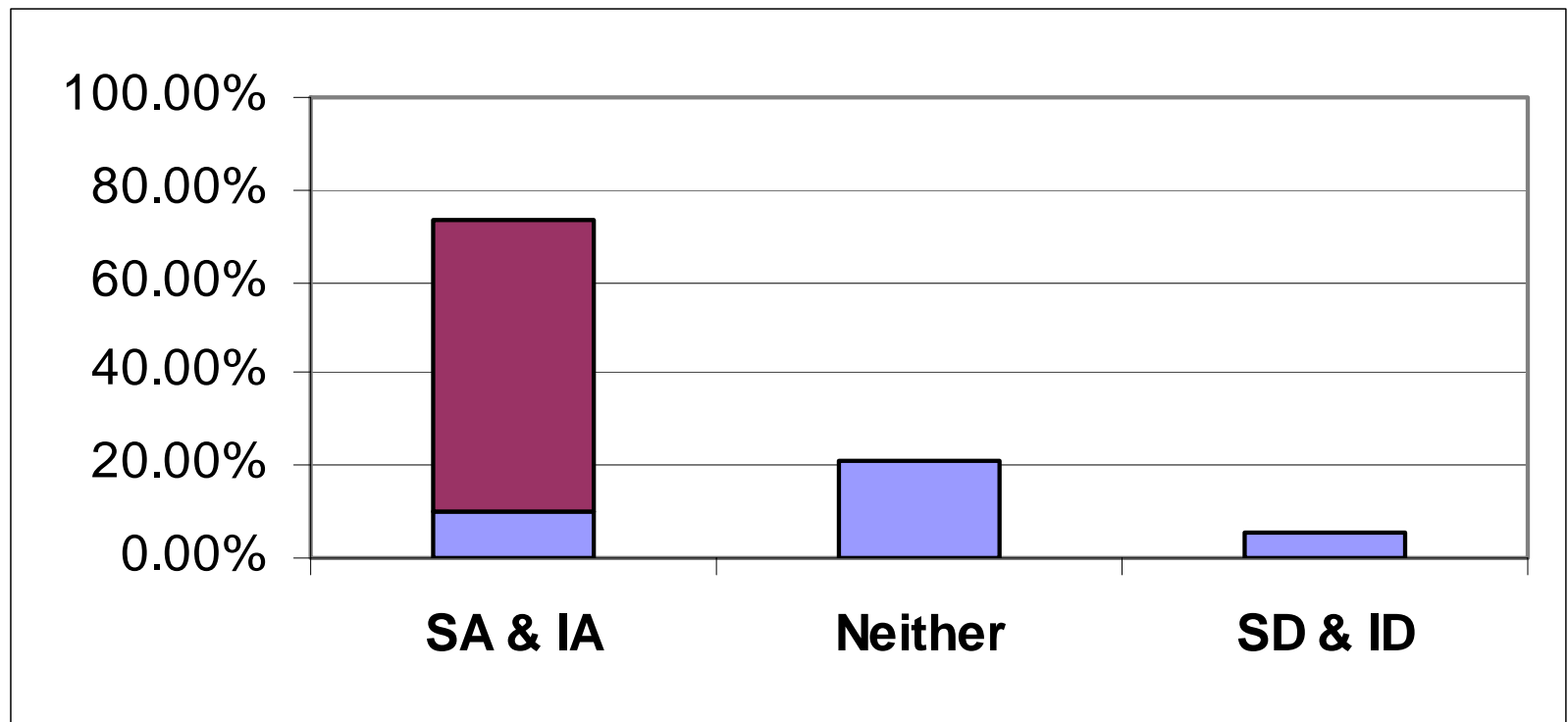

N = 19, 0 'no response'

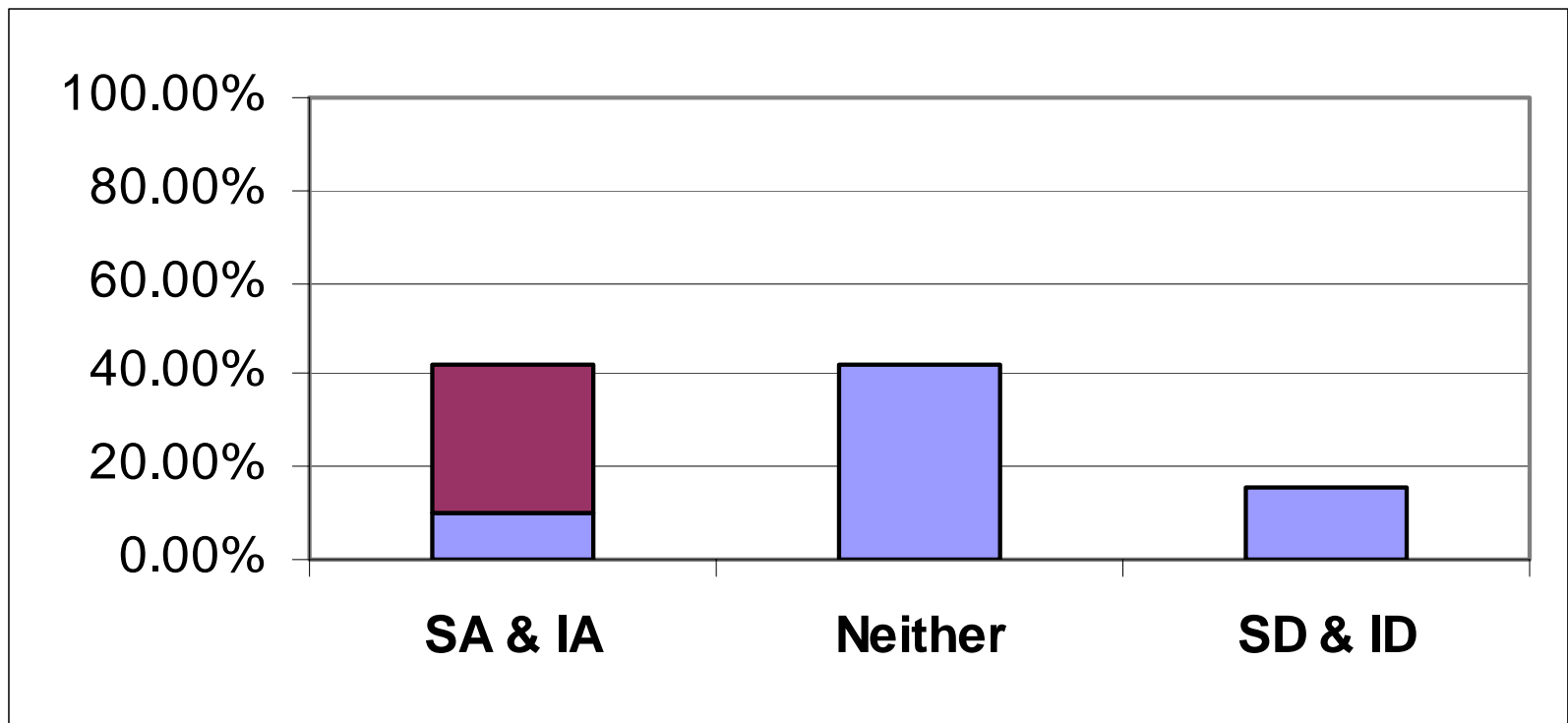SA = 4, IA = 11, Neither = 1, ID = 3, SD = 0

Tool5: Accreditation Tool is Useful Mechanism for Annual LPHD Program Planning Activities- **Reviewers' Responses**

N = 19, 0 'no response'

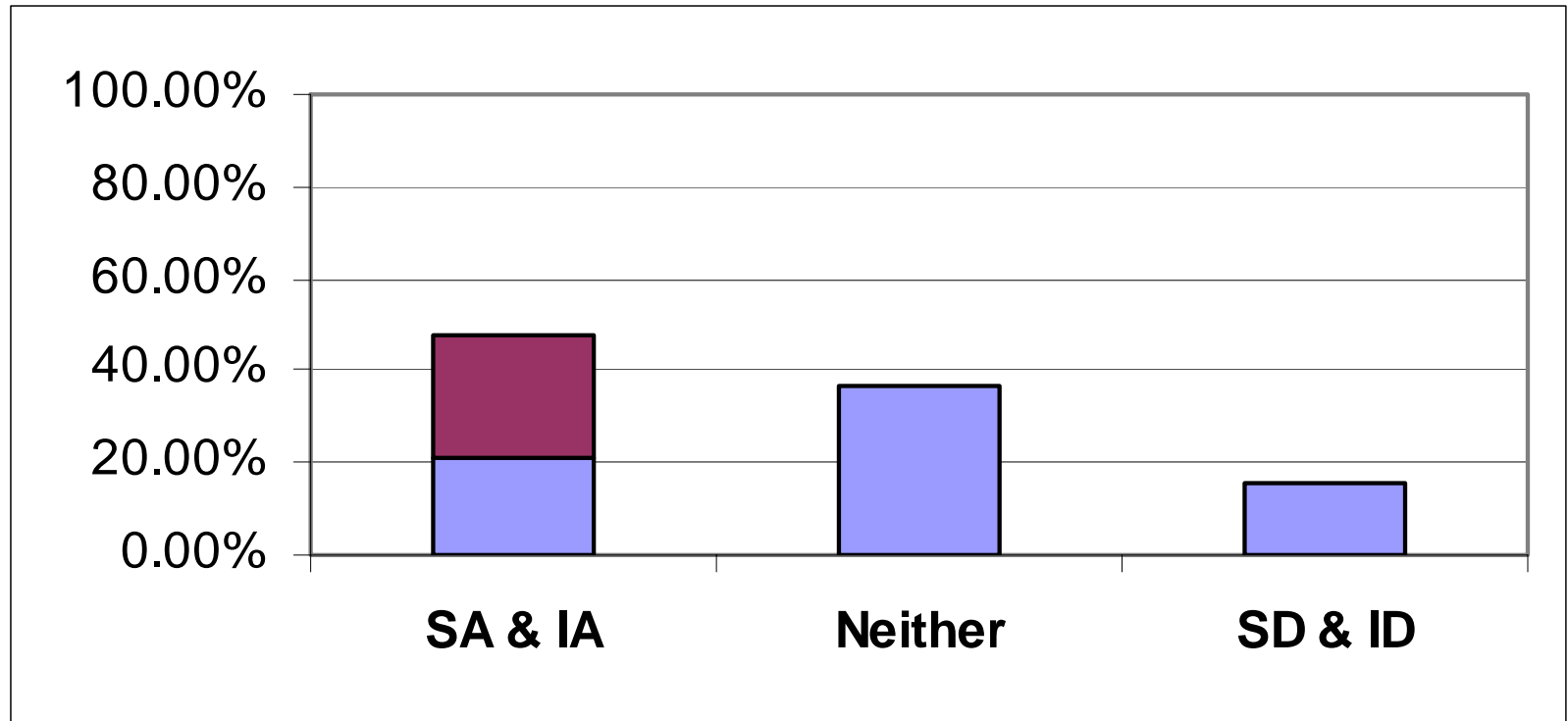SA = 2, IA = 12, Neither = 4, ID = 1, SD = 0

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TA1: Current Technical Assistance Resource Contributes to Quality Improvement of Programs- **Reviewers' Responses**

N = 19, 0 'no response'

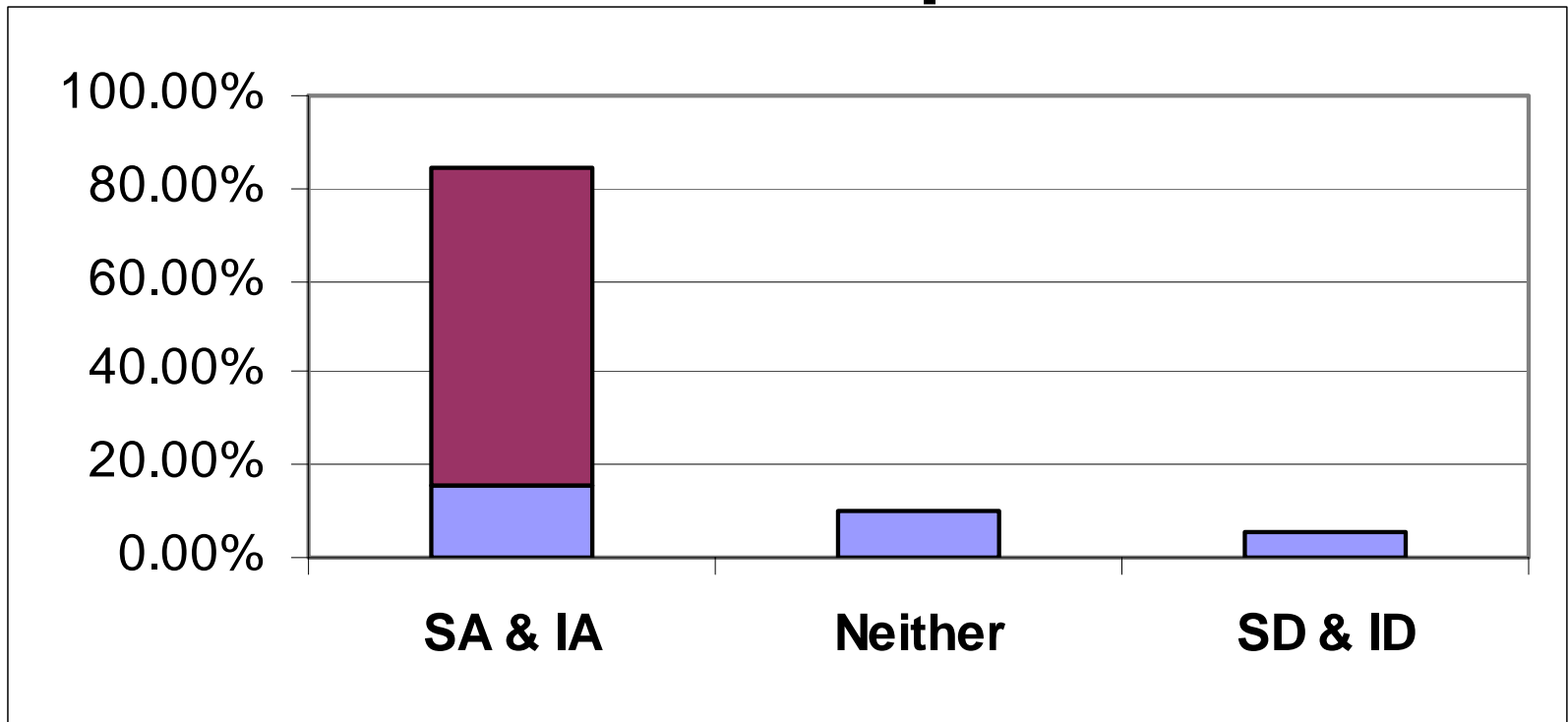SA = 2, IA = 6, Neither = 8, ID = 3, SD = 0

TA3: Accreditation Program Website is a Valuable Resource- **Reviewers' Responses**

N = 19, 0 'no response'
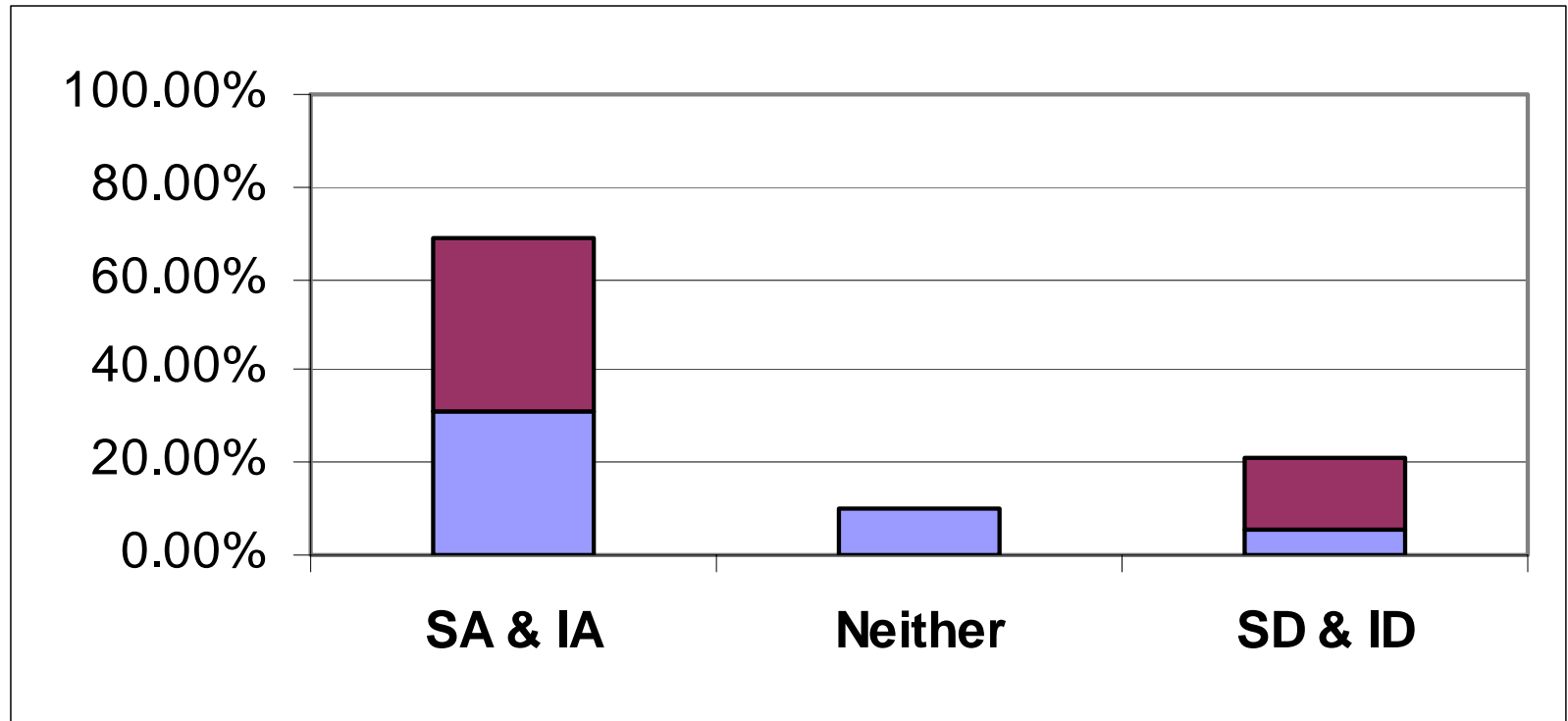
SA = 4, IA = 5, Neither = 7, ID = 3, SD = 0

AP1: Purpose of Accreditation Process Should Be On-going Quality Improvement-**Reviewers' Responses**

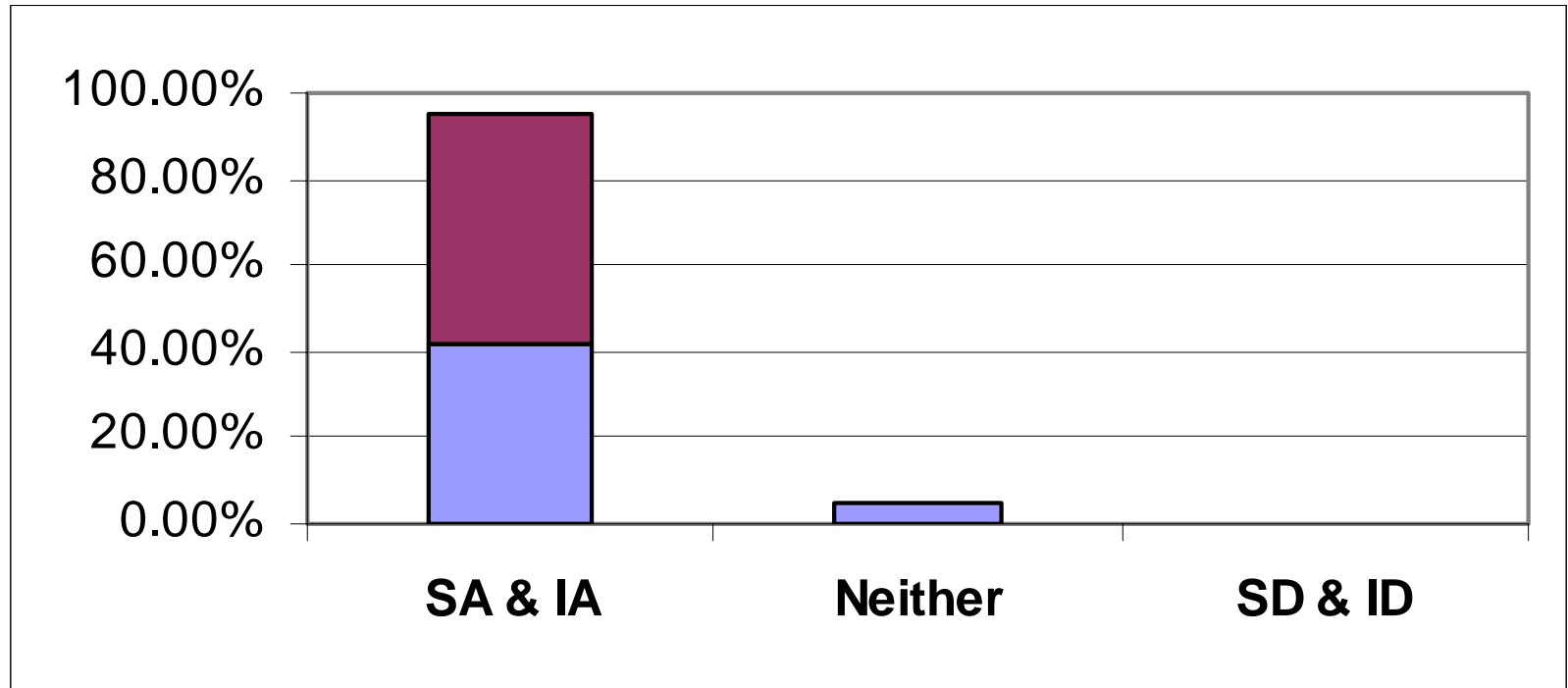N = 19, 0 'no response'

SA = 13, IA = 3, Neither = 2, ID = 1, SD = 0

AP2: Purpose of Accreditation Process Should Be Contract Compliance-**Reviewers' Responses**

N = 19, 0 'no response'

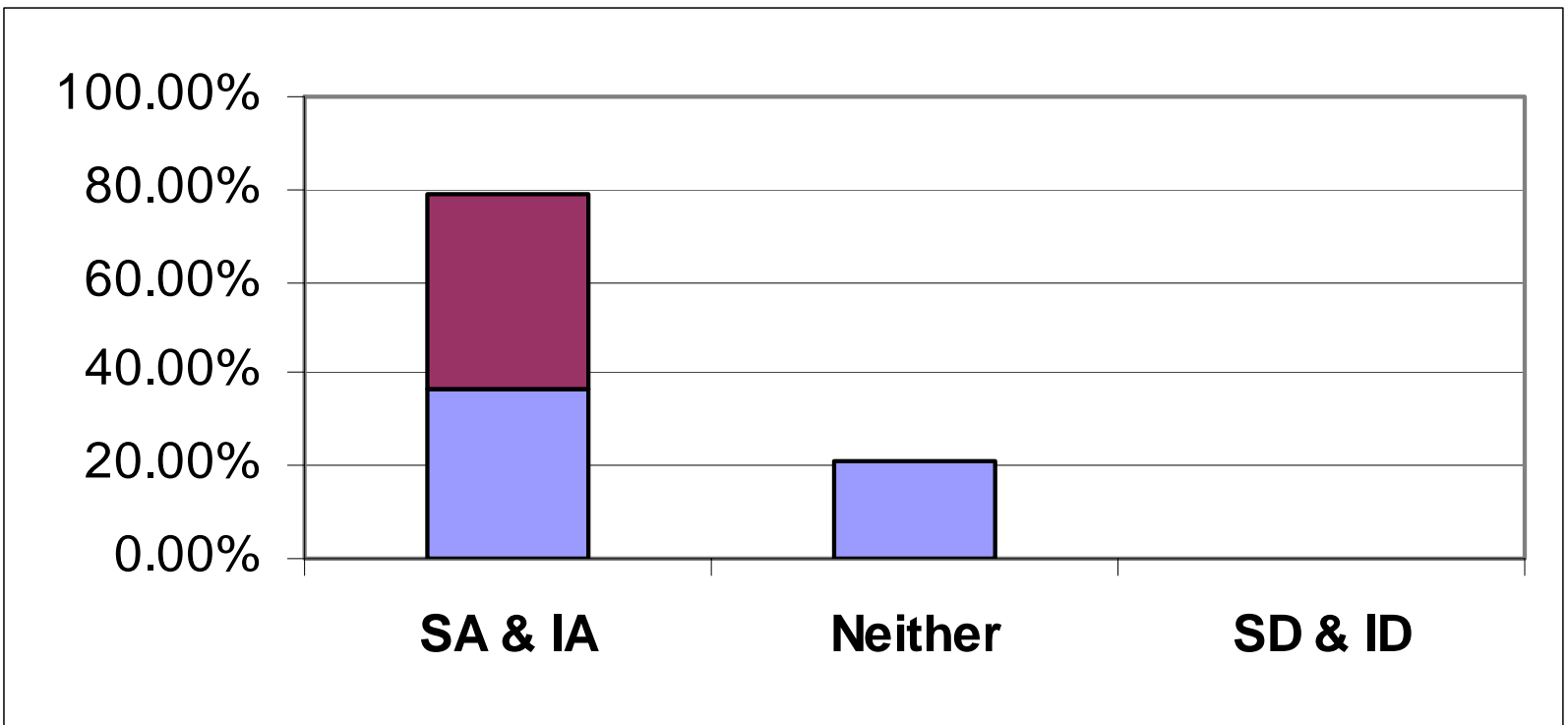SA = 6, IA = 7, Neither = 2, ID = 3, SD = 1

AP3: Accreditation Process Reflects a Set of Achievable Standards- **Reviewers' Responses**

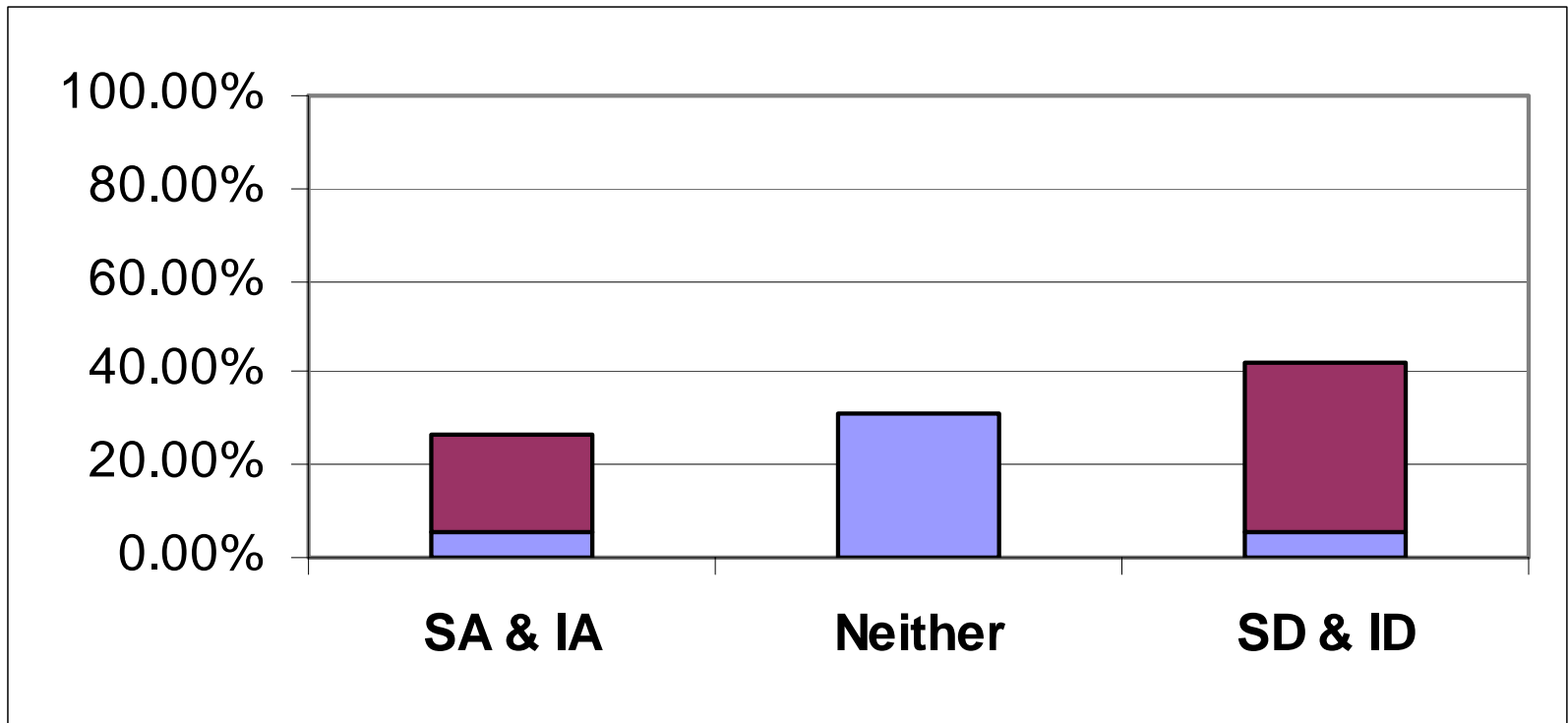N = 19, 0 'no response'

SA = 10, IA = 8, Neither = 1, SD & IA = 0

AP4: Accreditation Process Can Be Improved by Increased Focus on Recommendations for Performance Improvement- **Reviewers' Reponses**

N = 19, 0 'no response'

SA = 7, IA = 8, Neither = 4, SD & ID = 0

AP5: Is Important for Agencies to Seek Funds to Conduct an Outside Objective Evaluation of Accreditation Program- **Reviewers' Responses**
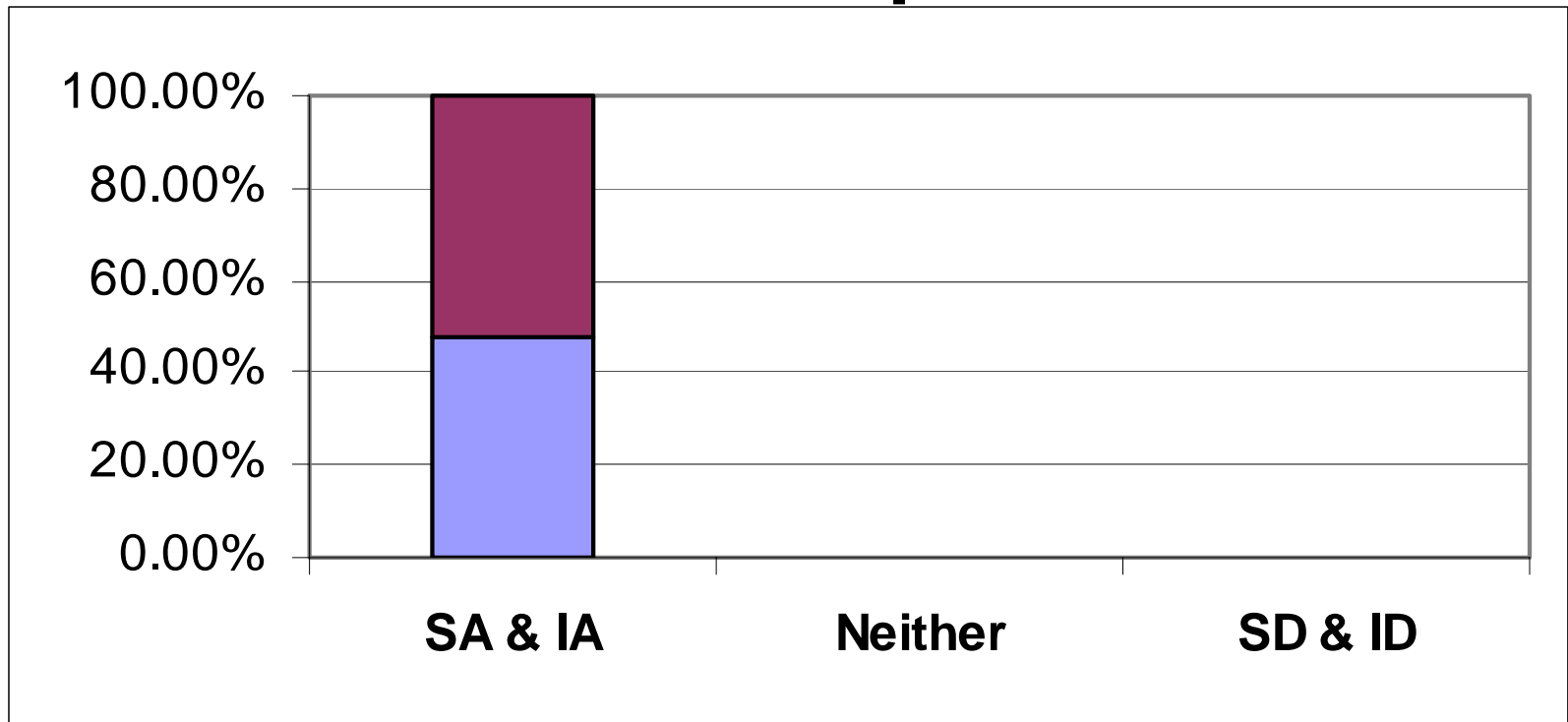

N = 19, 0 'no response'

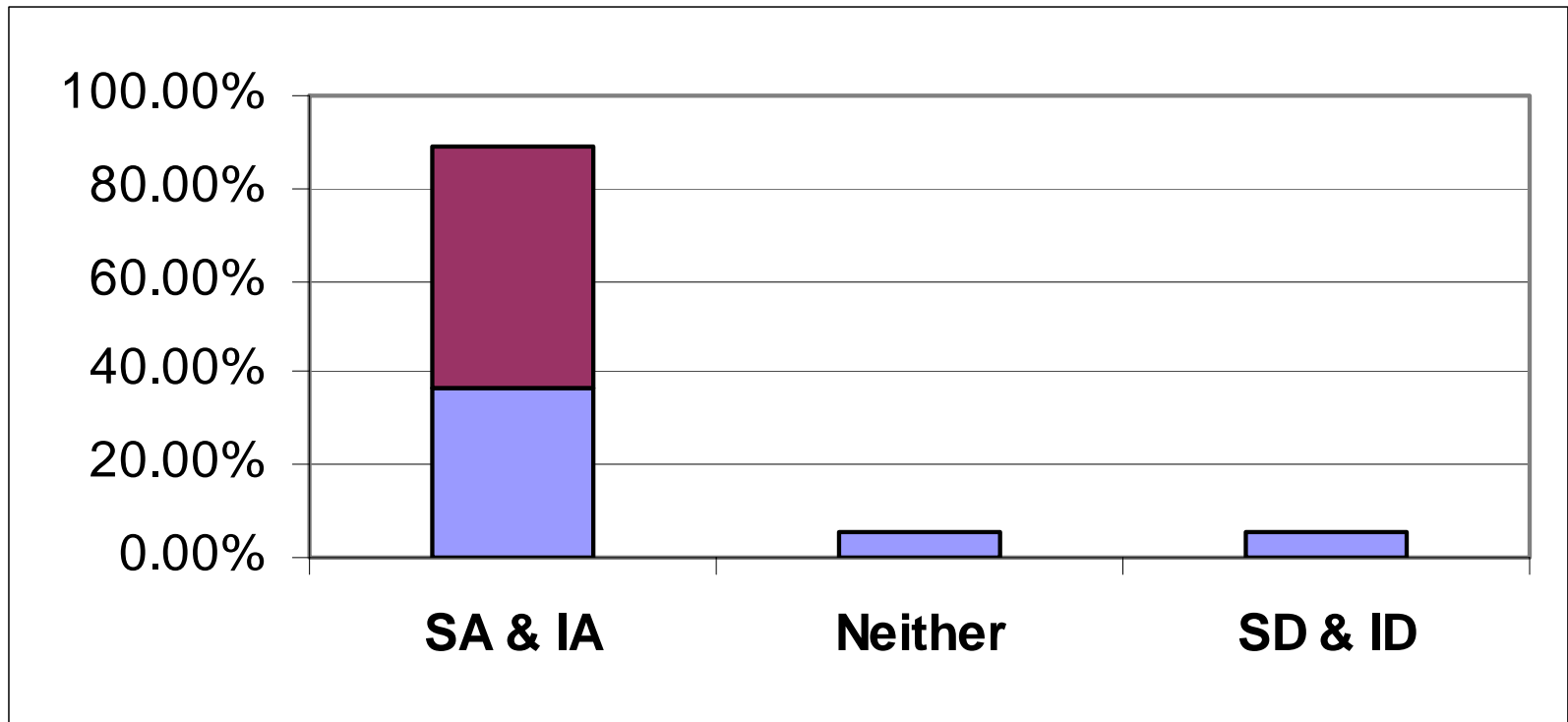SA = 1, IA = 4, Neither = 6, ID = 7, SD = 1

AP6: Overall, Accreditation Process Has Improved Program Performance of LPHD- **Reviewers' Responses**

N = 19, 0 'no response'

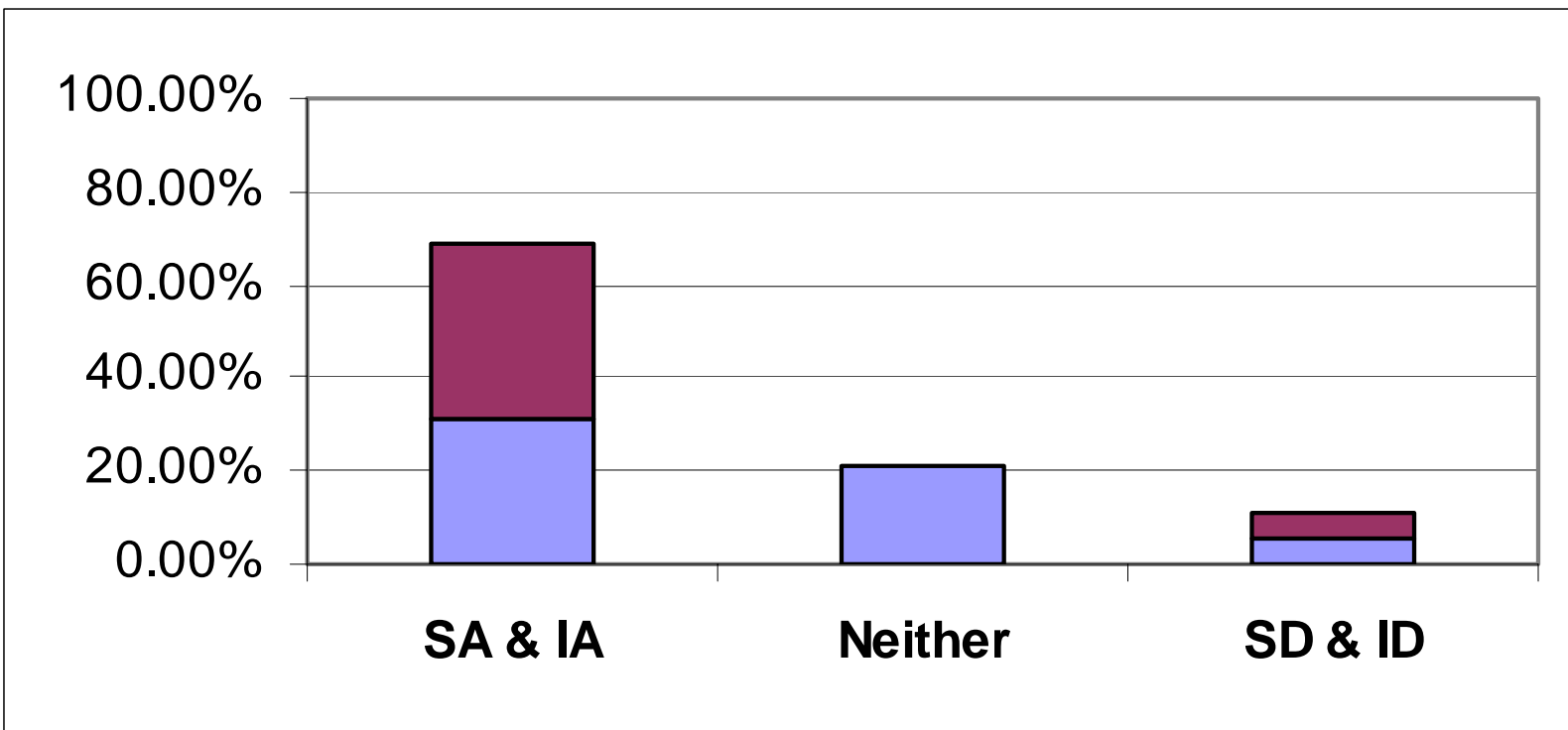SA = 9, IA = 10, Neither = 0, SD & ID = 0

AP7: Accreditation Process is Useful for Internal LPHD Program Evaluation Tool- **Reviewers' Responses**

N = 19, 0 'no response'

SA = 10, IA = 7, Neither = 1, ID = 1, SD = 0

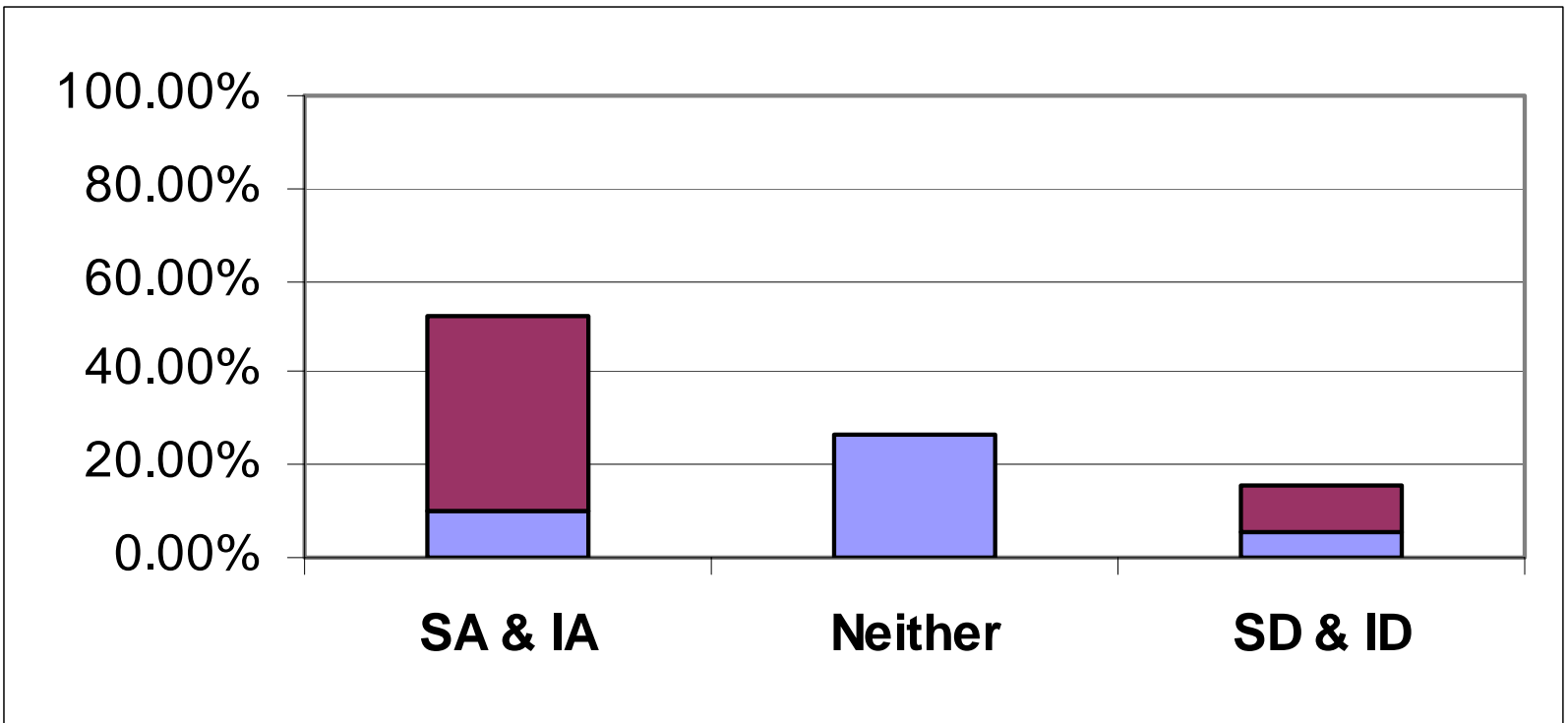# AP8: Accreditation Should Be Based On All State-Funded Services Included in Process-**Reviewers' Responses**

N = 19, 0 'no response'

SA = 6, IA = 7, Neither = 4, ID = 1, SD = 1

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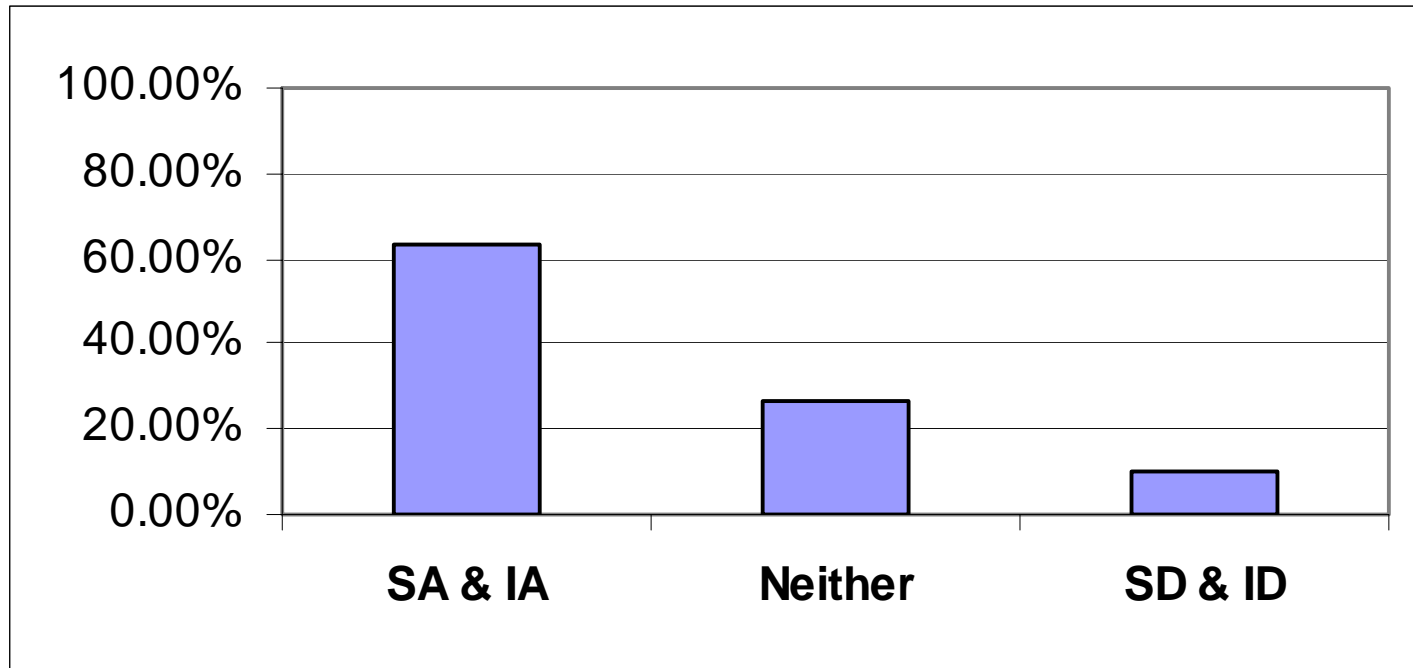# AP9: Accreditation Should Be Based on Minimum Set of Services That Every LPHD Must Provide- **Reviewers' Responses**

N = 18, 1 'no response'
SA = 2, IA = 8, Neither = 5, IA = 2, SD = 1

NtWk1: Establishment of APSN Would Improve Accreditation Process-
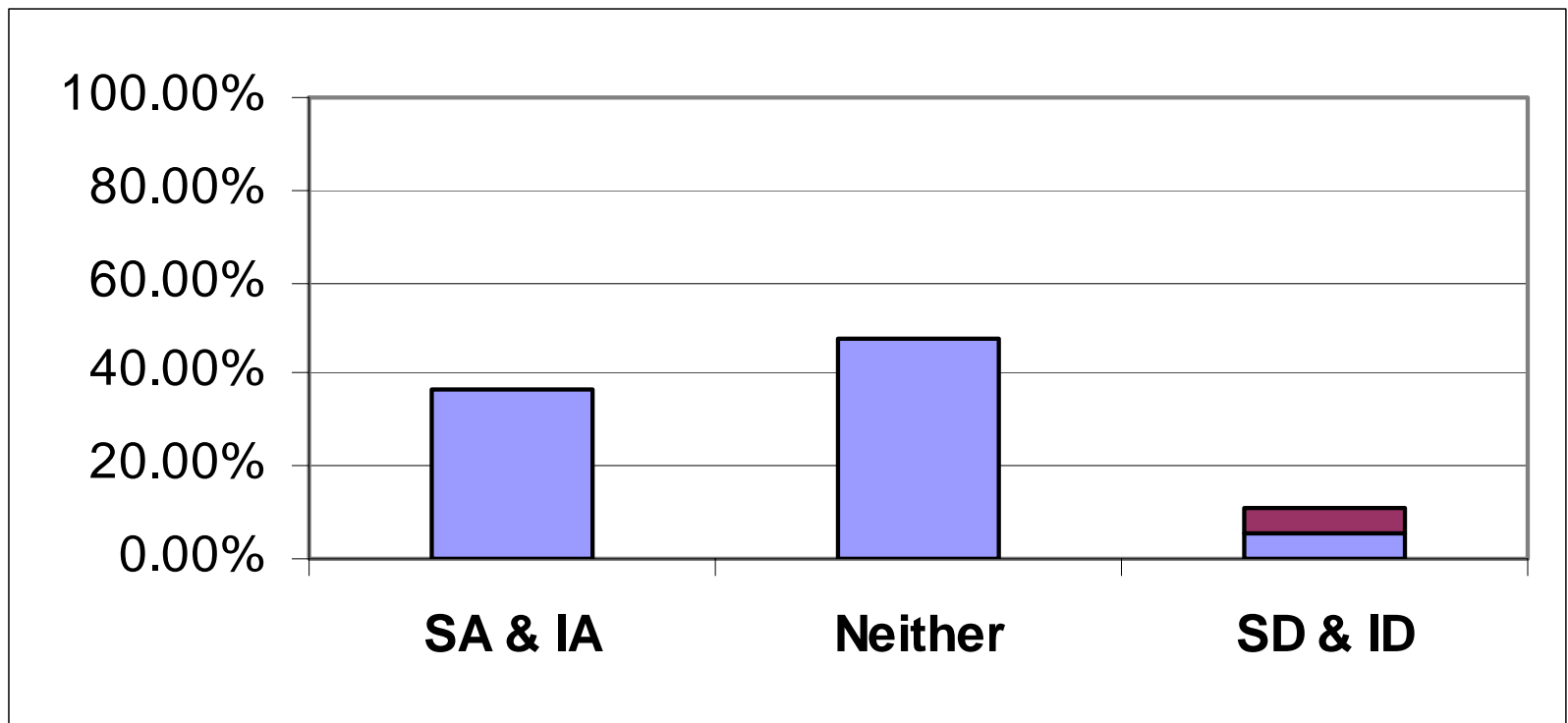## **Reviewers' Responses**

N = 19, 0 'no response'

SA = 0, IA = 12, Neither = 5, ID = 2, SD = 0

NtWk2: I would seek program guidance from peer network for purpose of achieving accreditation-**Reviewers' Responses**
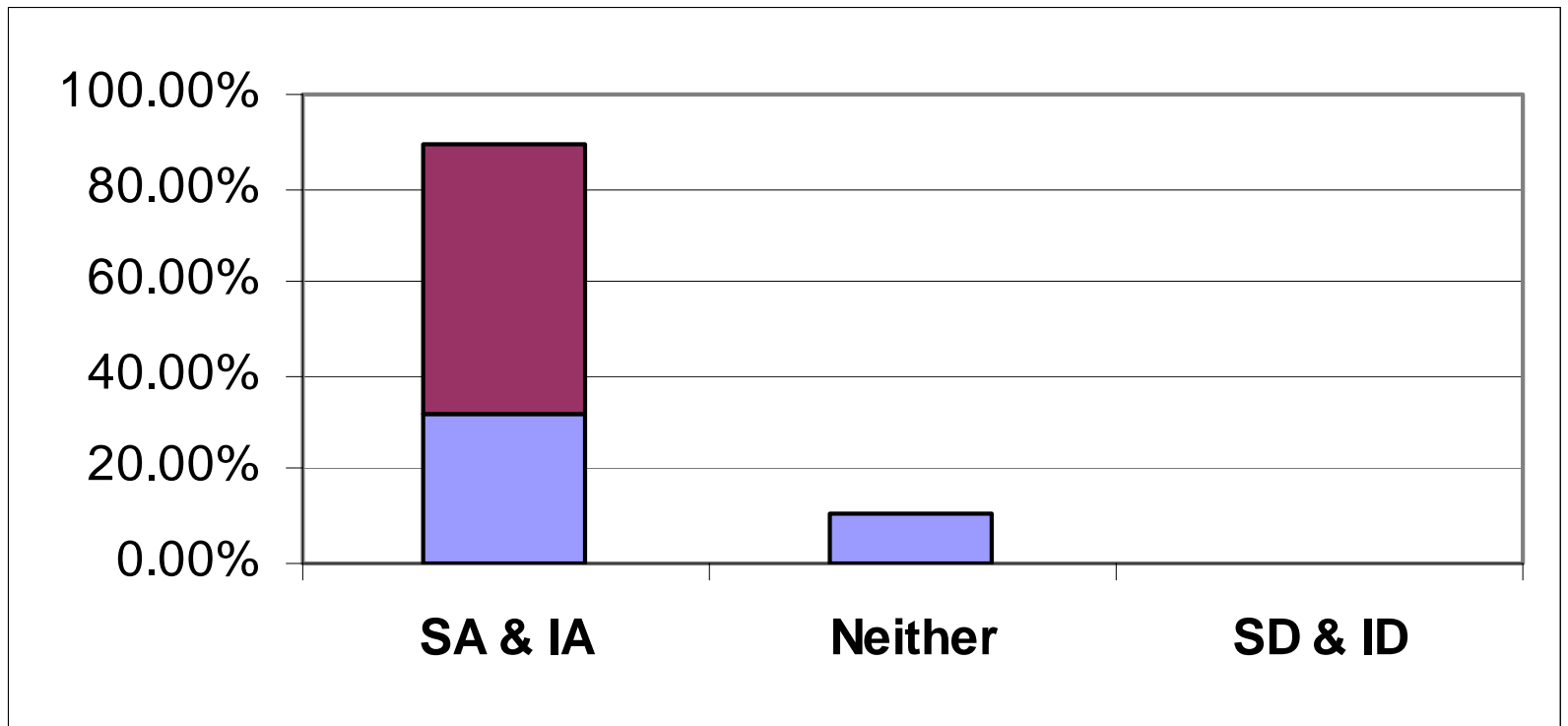

N = 18, 1 'no response'

SA = 0, IA = 7, Neither = 9, ID = 1, SD = 1

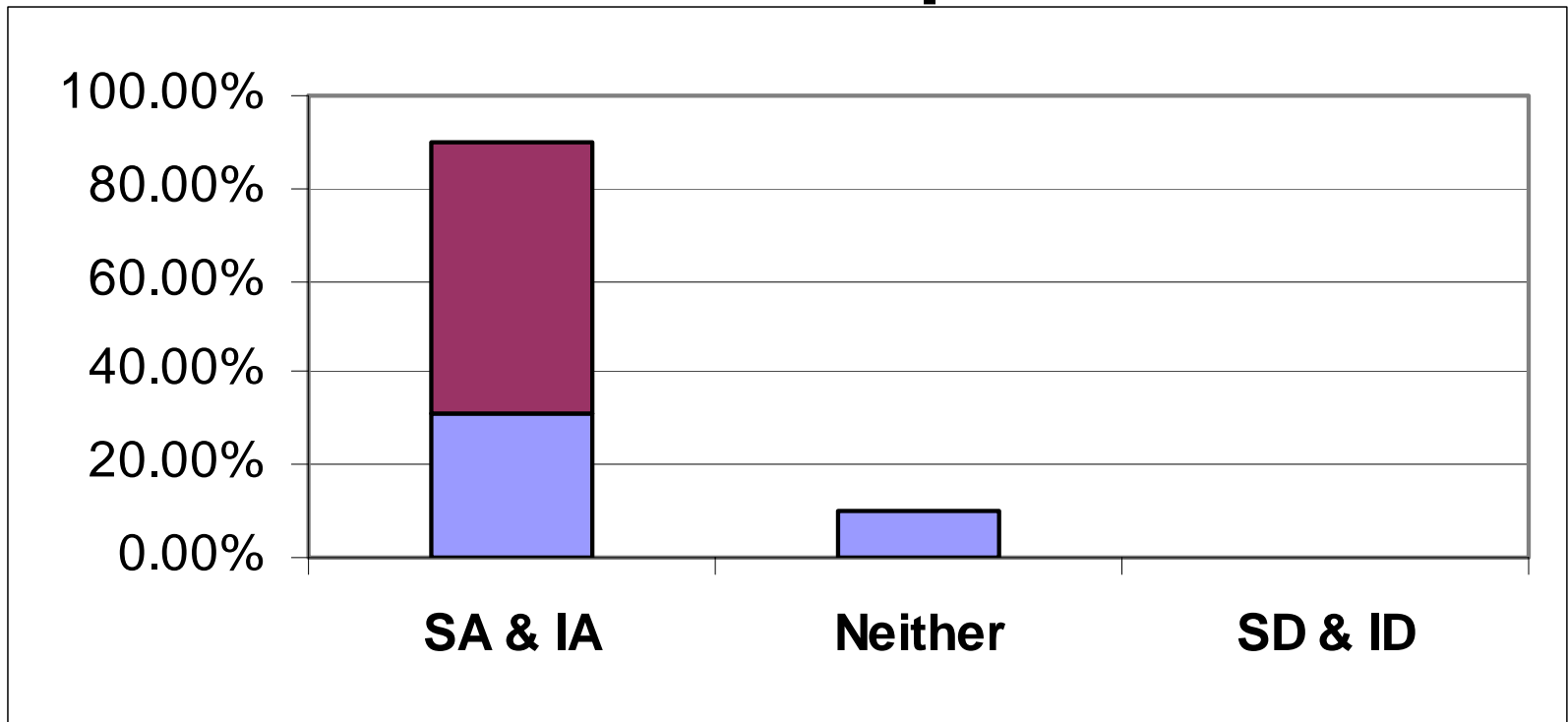# NtWk3: I would serve on and/or share resources with a peer network-**Reviewers' Responses**

N = 18, 1 'no response'

SA = 4, IA = 7, Neither = 5, ID = 1, SD = 1

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BP1: Establishment of Best Practices (BP) Directory Would Improve Accreditation Process- **Reviewers' Responses**
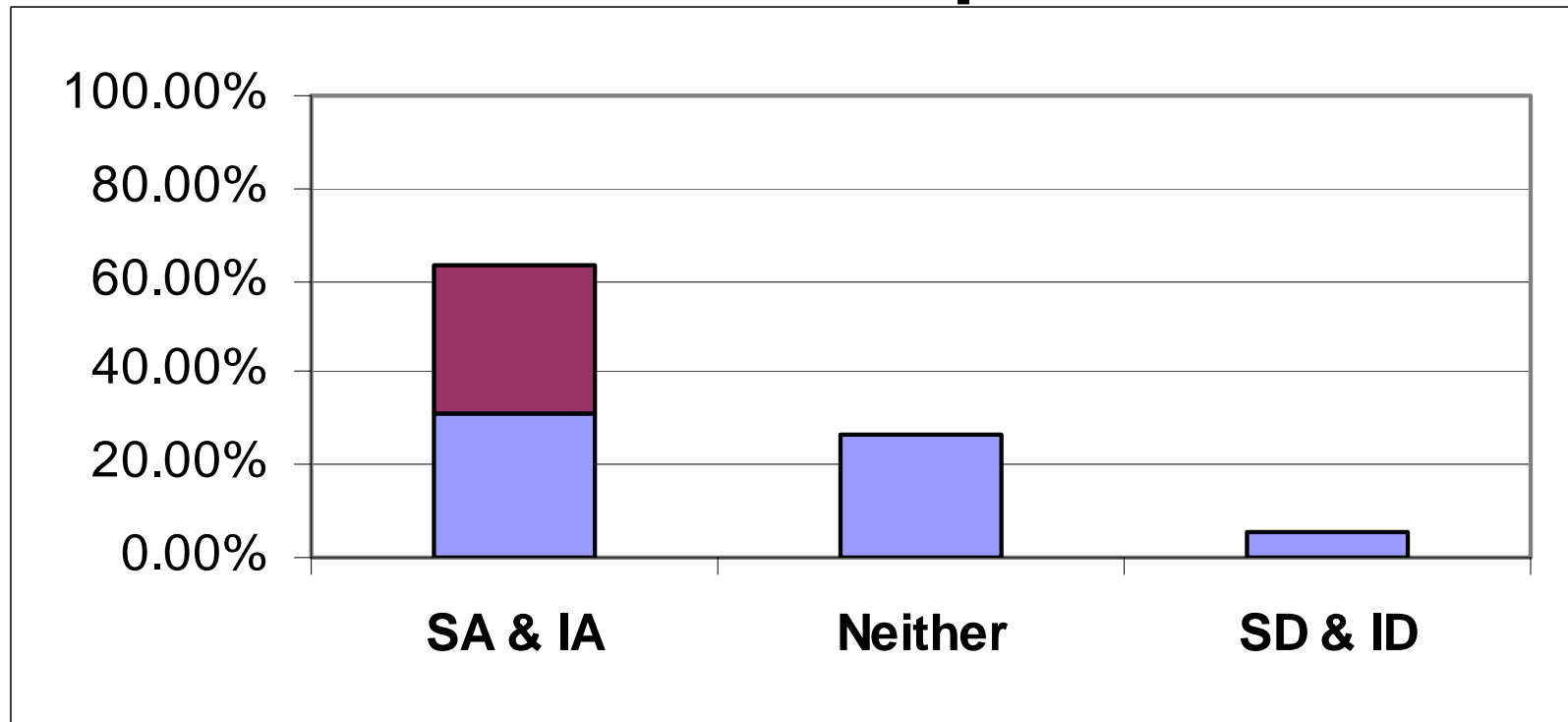

N = 19, 0 'no response'

SA = 6, IA = 11, Neither = 2, SD & ID = 0

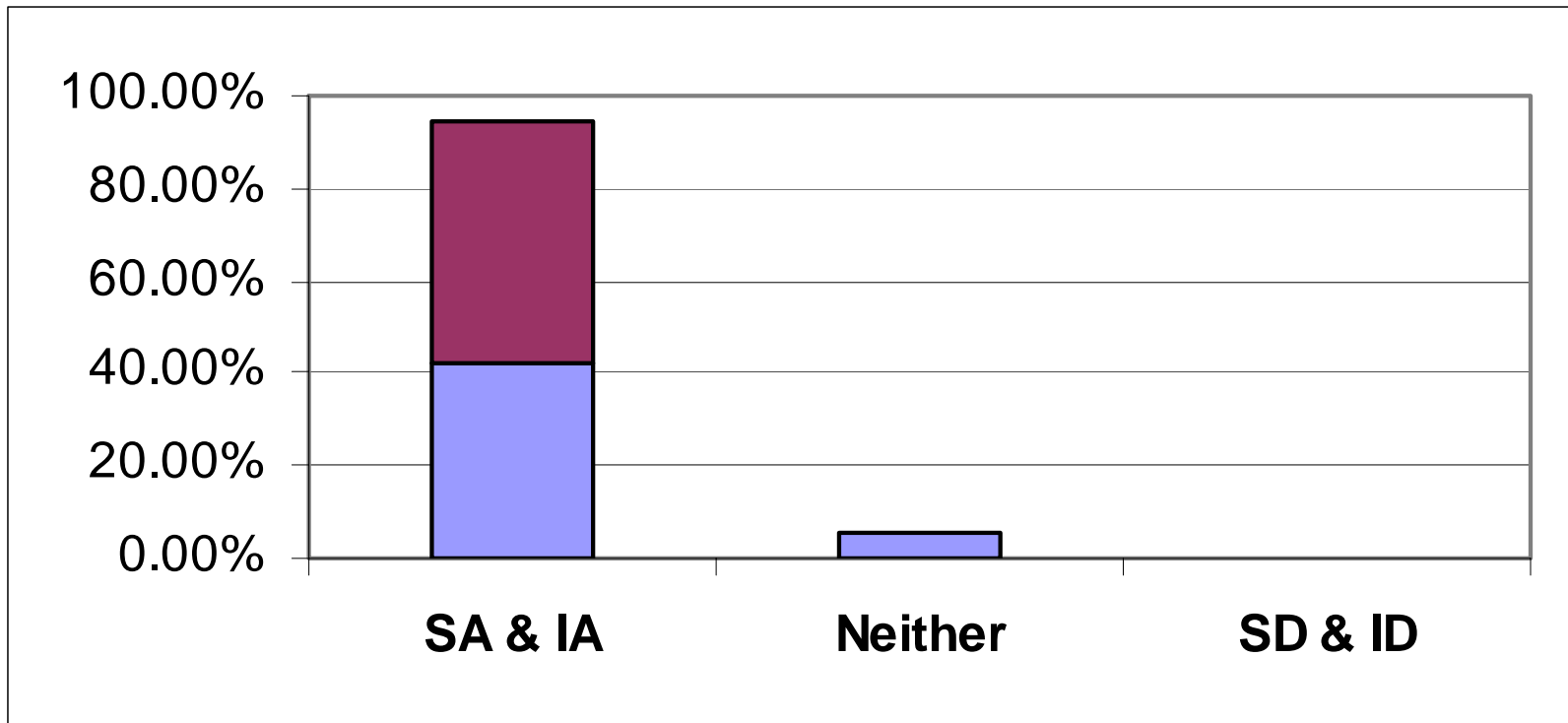# BP2: I would seek program guidance from BP Directory for purpose of achieving accreditation-**Reviewers' Responses**

N = 18, 1 'no response'

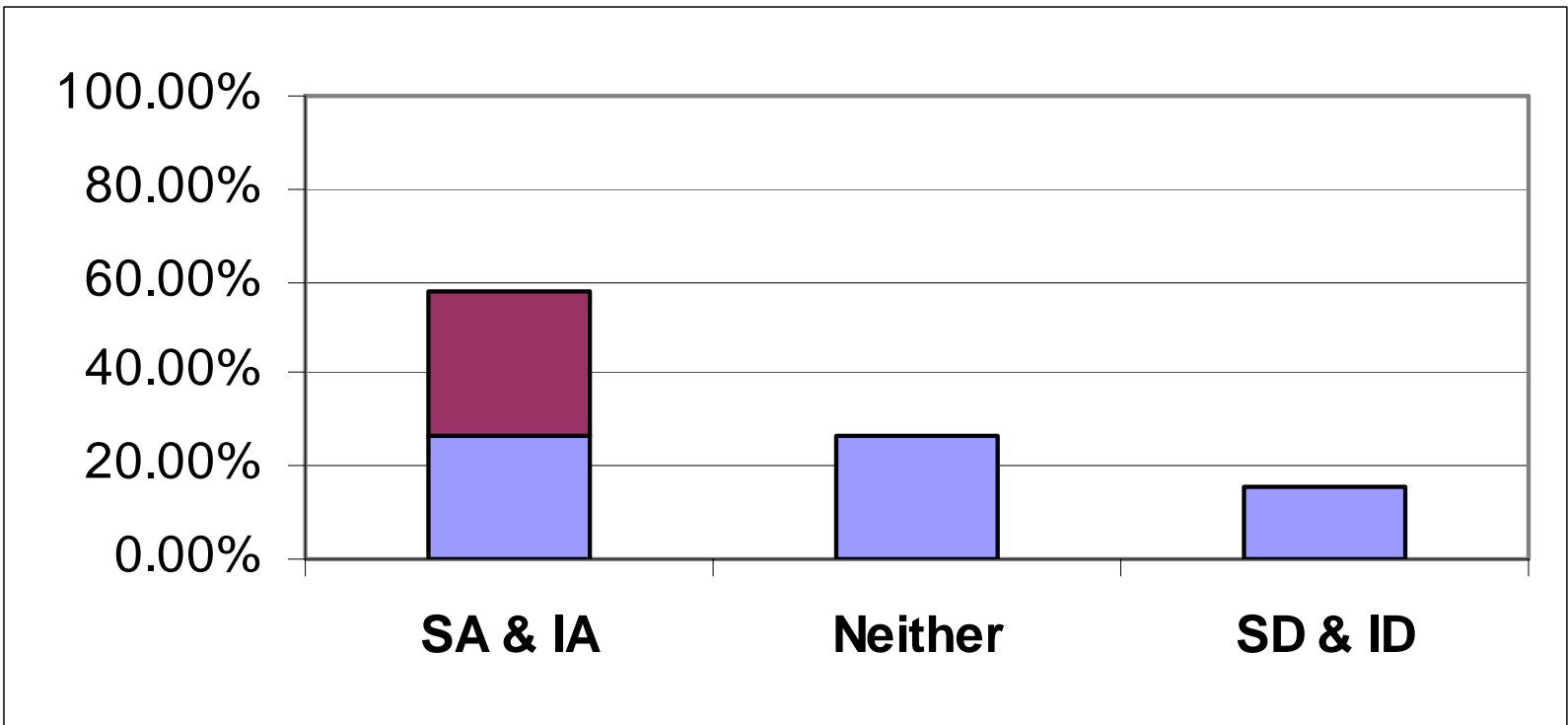SA = 6, IA = 6, Neither = 5, ID = 1, SD = 0

BP3: I would share results with the Best Practice Directory-
Reviewers' Responses

N = 19, 0 'no response'

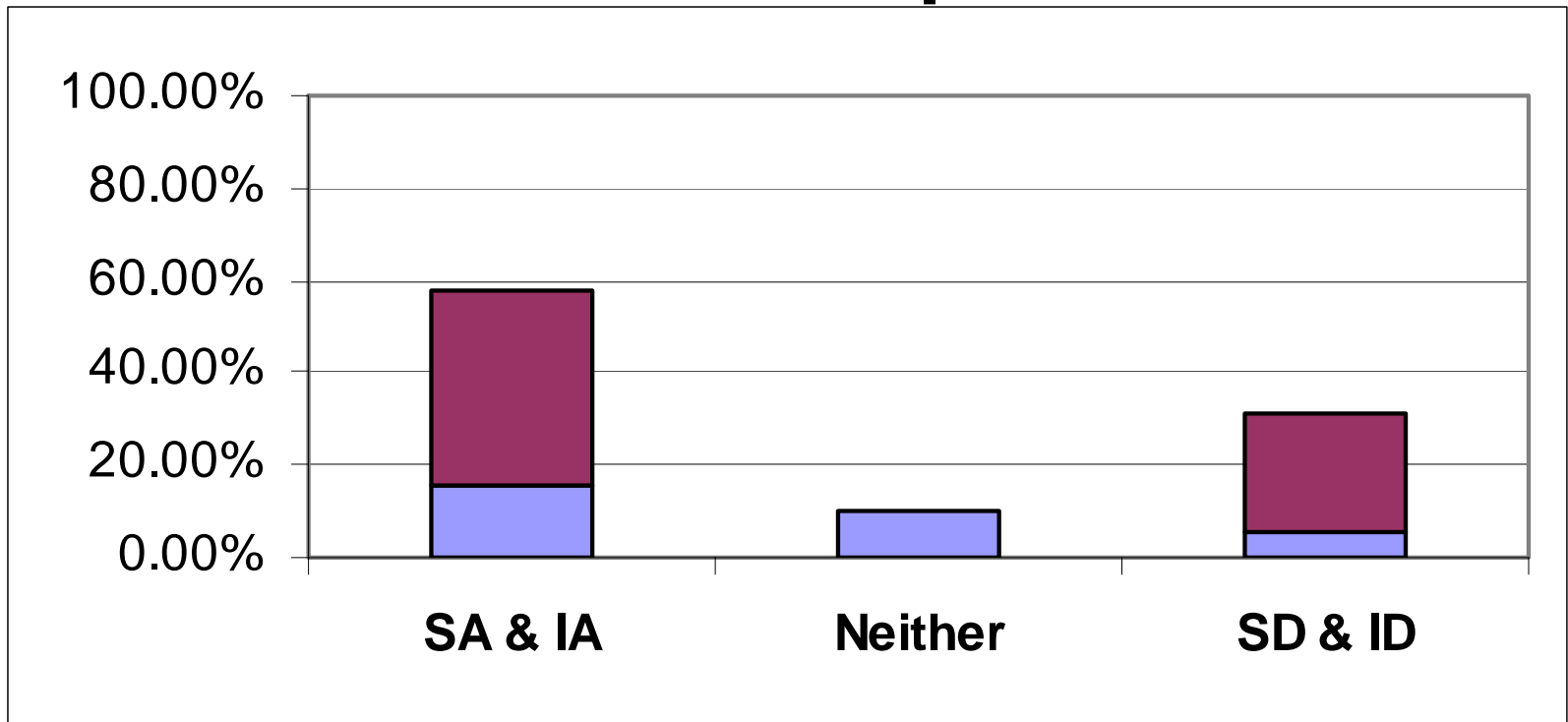SA = 8, IA = 10, Neither = 1, SD & ID = 0

Train1: Additional Training on the Accreditation Process is Needed for LPHDs- **Reviewers' Responses**

N = 19, 0 'no response'

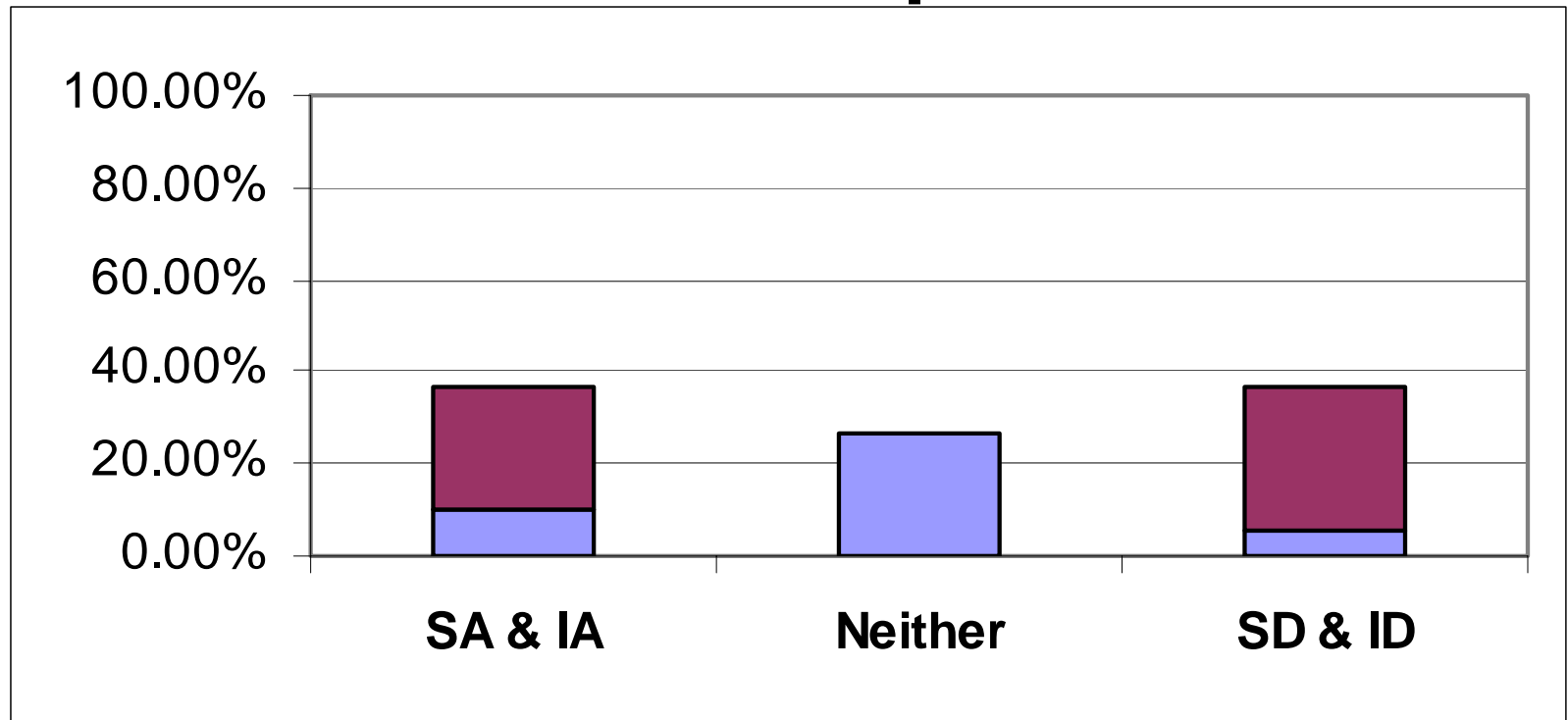SA = 6, IA = 5, Neither = 5, ID = 3, SD = 0

Train2: Additional Training on Accreditation Process is Needed for Program Reviewers- **Reviewers' Responses**

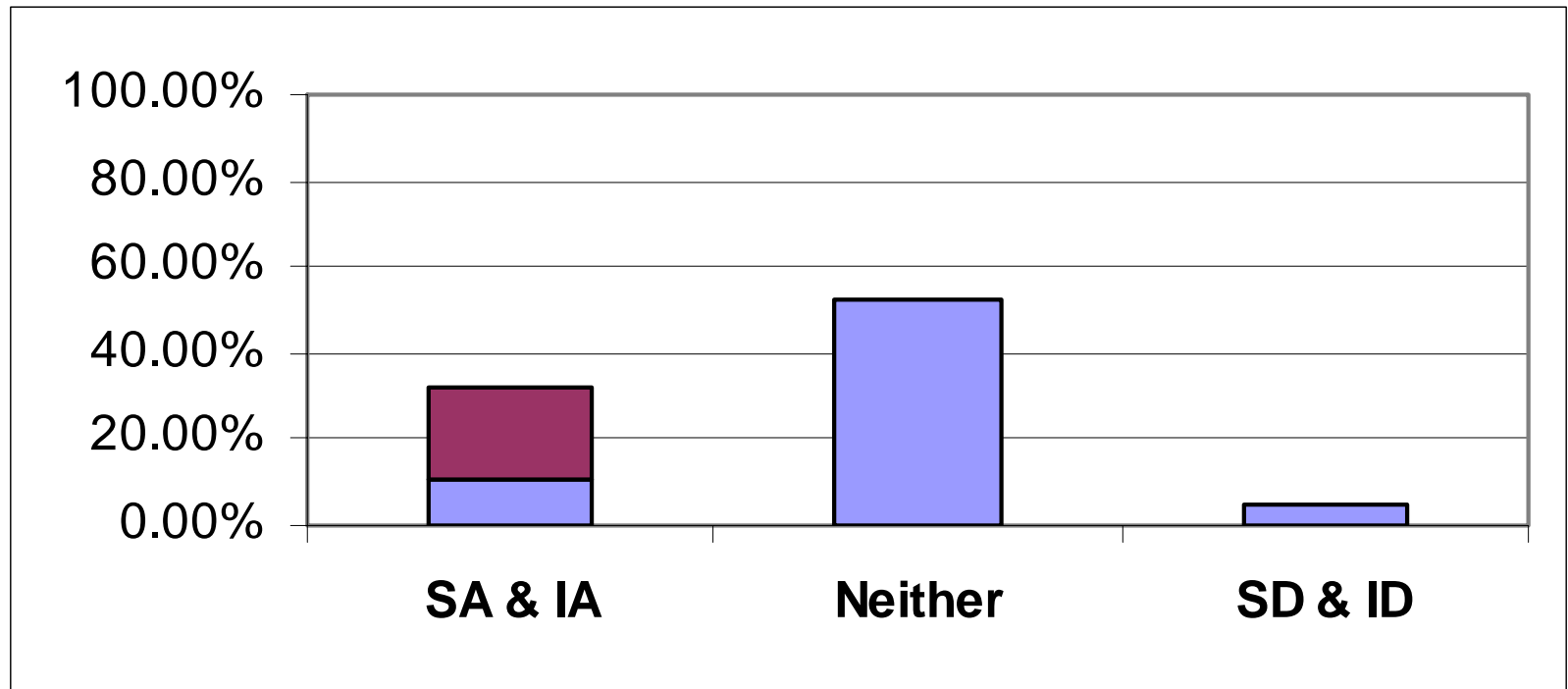N = 19, 0 'no response'

SA = 3, IA = 8, Neither = 2, ID = 5, SD =1

Comm1: I am familiar with the membership and purview of the Accreditation Commission-**Reviewers' Responses**

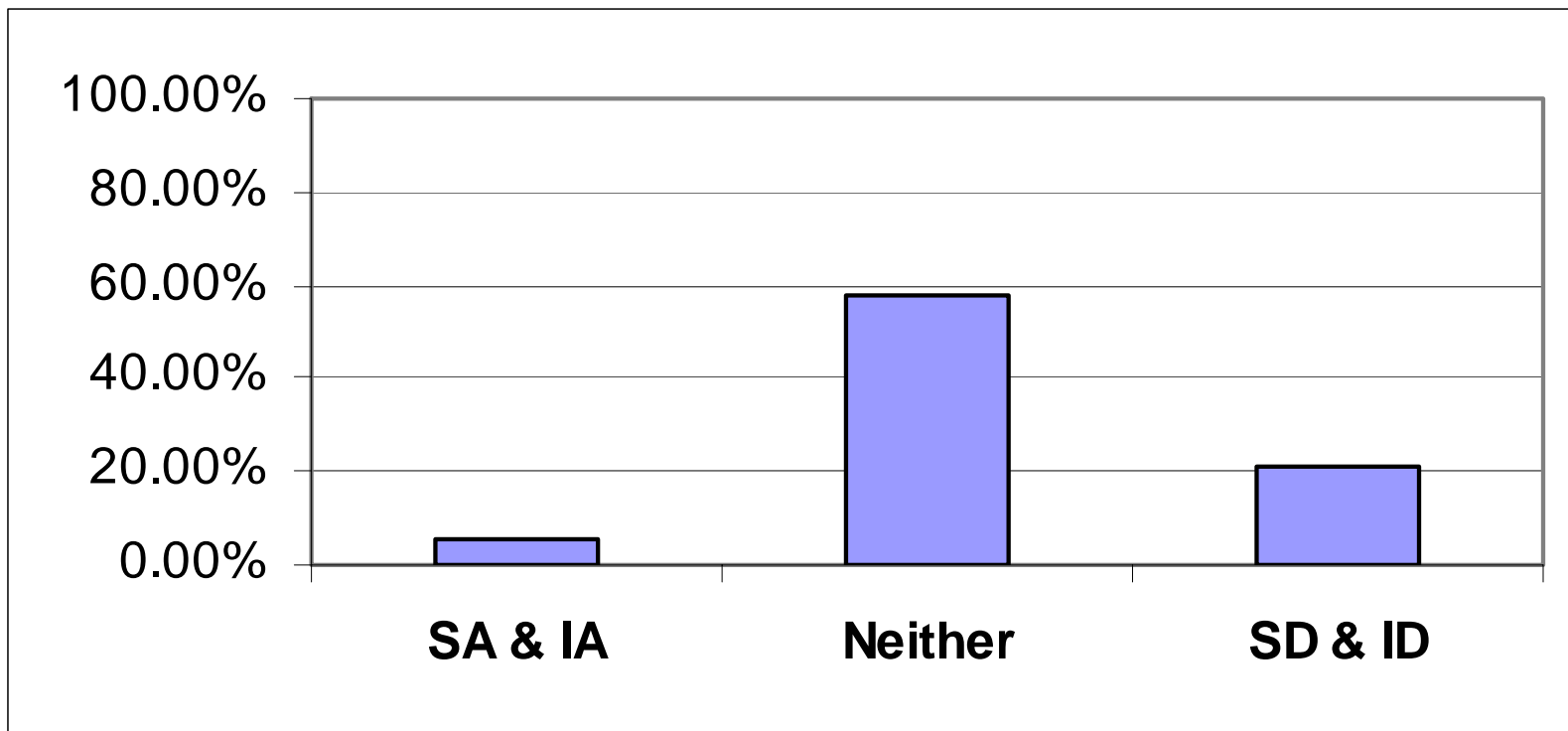N = 19, 0 'no response'

SA = 2, IA = 5, Neither = 5, ID = 6, SD = 1

Comm2: There Is Adequate Representation of LDH on the Commission-**Reviewers' Responses**

N = 16, 2 'no response'

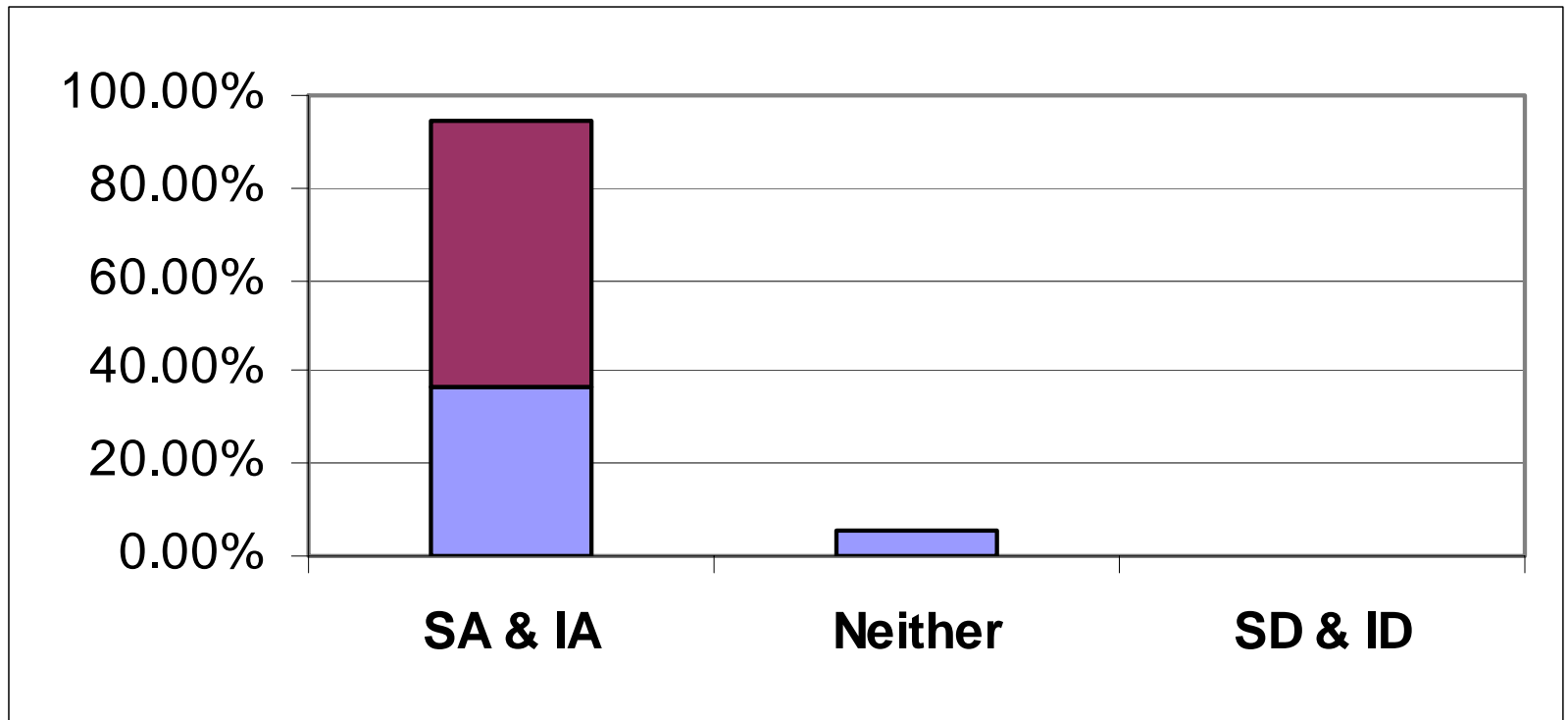SA = 2, IA = 4, Neither = 10, ID = 1, SD = 0

Comm3: Current Communication Between the Commission and Accreditation Process Stakeholders is Adequate- **Reviewers' Responses**

N = 16, 3 'no responses'

SA = 0, IA = 1, Neither = 11, ID = 4, SD = 0

MPHI1: I understand MPHI's role in the accreditation process-
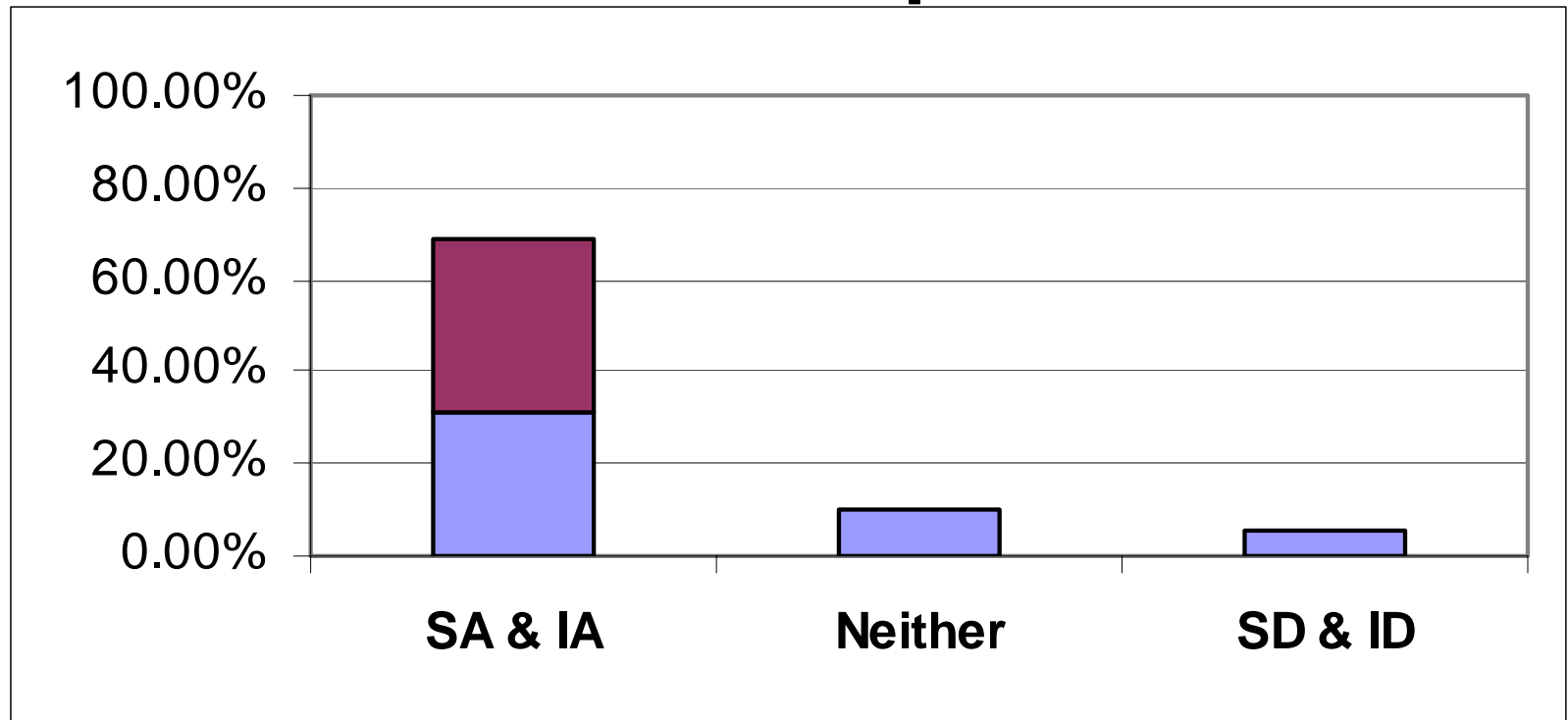## **Reviewers' Responses**

N = 19, 0 'no response'

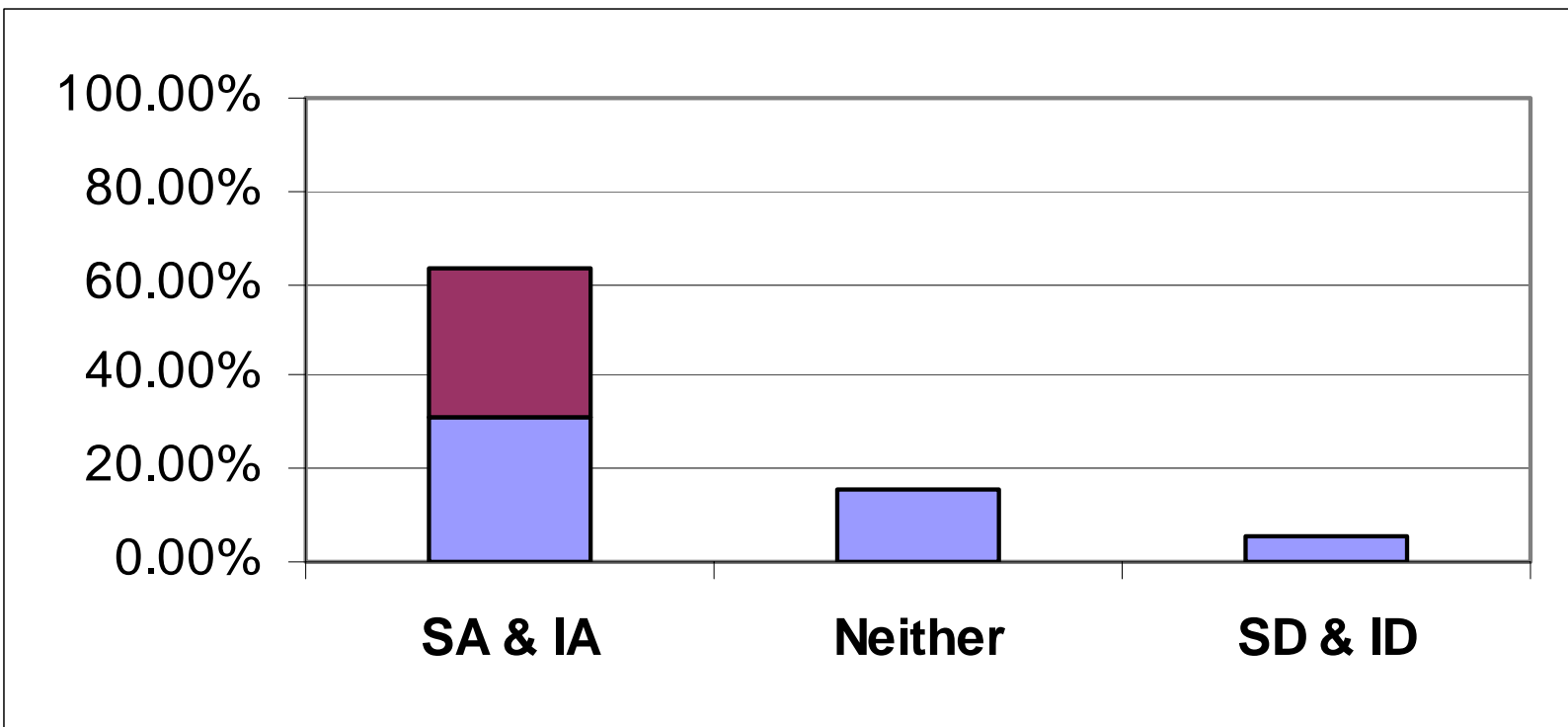SA = 7, IA = 11, Neither = 1, SD & ID = 0

MPHI2: Coordination of Accreditation Program is Enhanced by MPHI's Participation-**Reviewers' Responses**

N = 16, 3 'no responses'

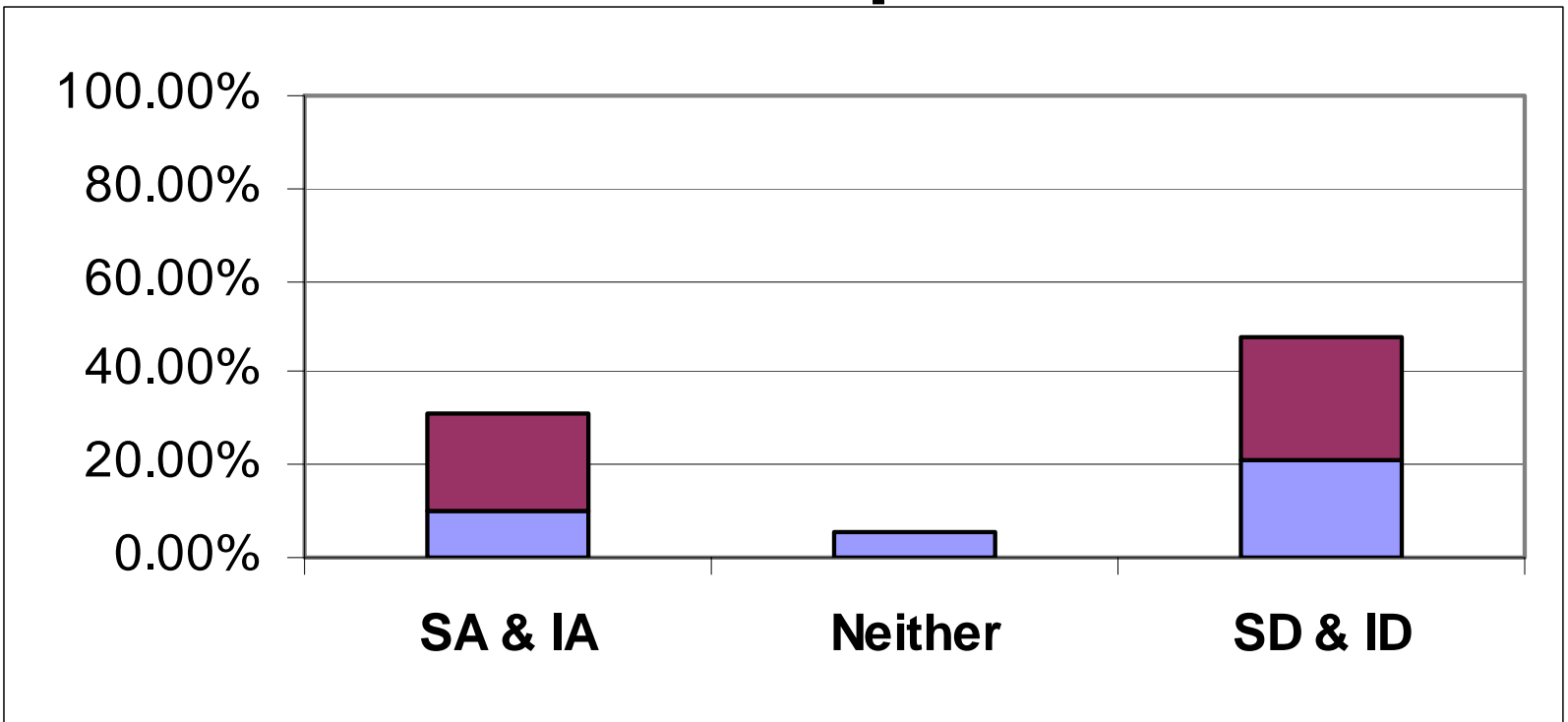SA = 6, IA = 7, Neither = 2, ID = 1, SD = 0

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MPHI3: Processes for which MPHI is Responsible are Handled in a Satisfactory Manner - **Reviewers' Responses**

N = 16, 3 'no responses'

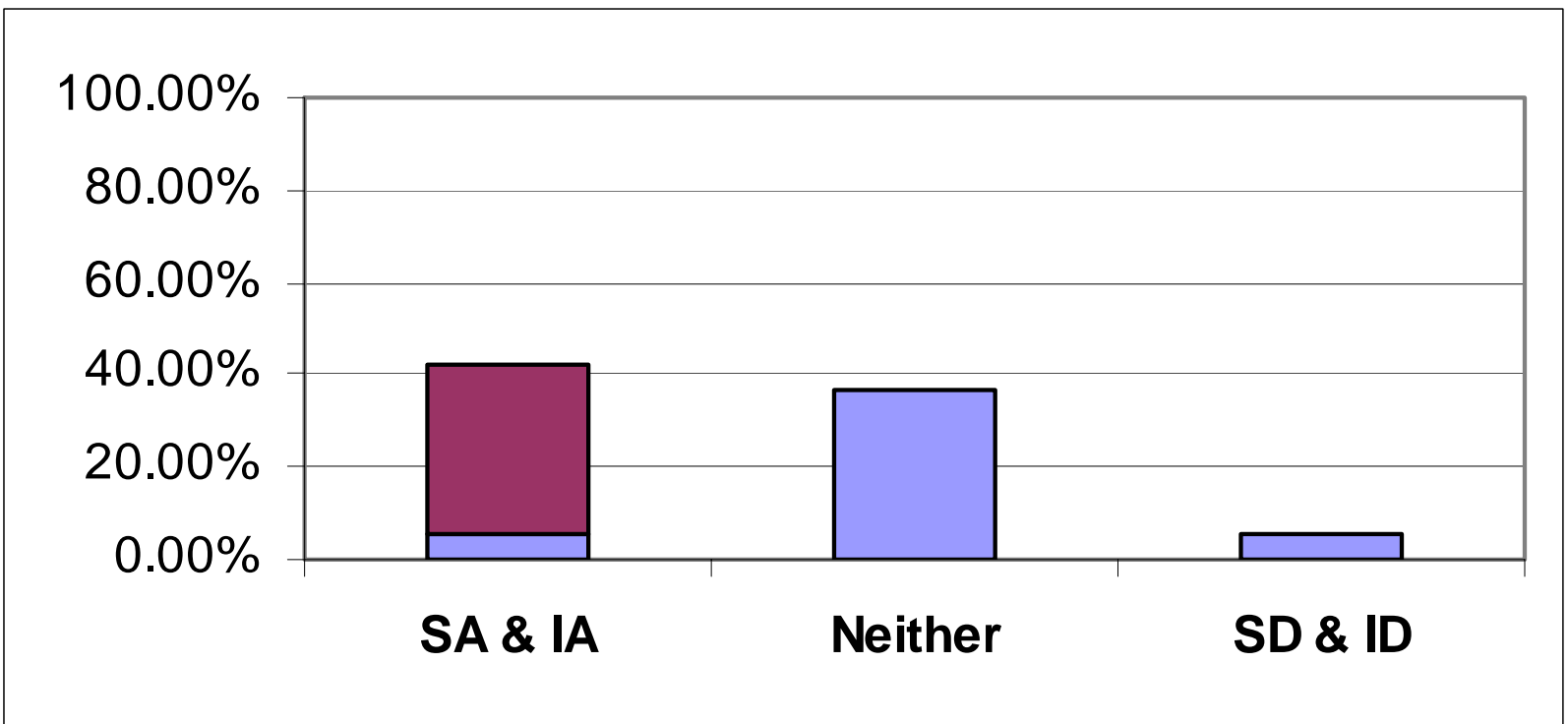SA = 6, IA = 6, Neither = 3, ID = 0, SD = 1

NPHPS1: I am familiar with the CDC National Public Health Performance Standards- **Reviewers' Responses**

N = 16, 3 'no responses'

SA = 2, IA = 4, Neither = 1, ID = 5, SD = 4

NPHPS2: Accreditation for Commendation for LPHDs Should Be Tied to Use of NPHPS-**Reviewers' Responses**
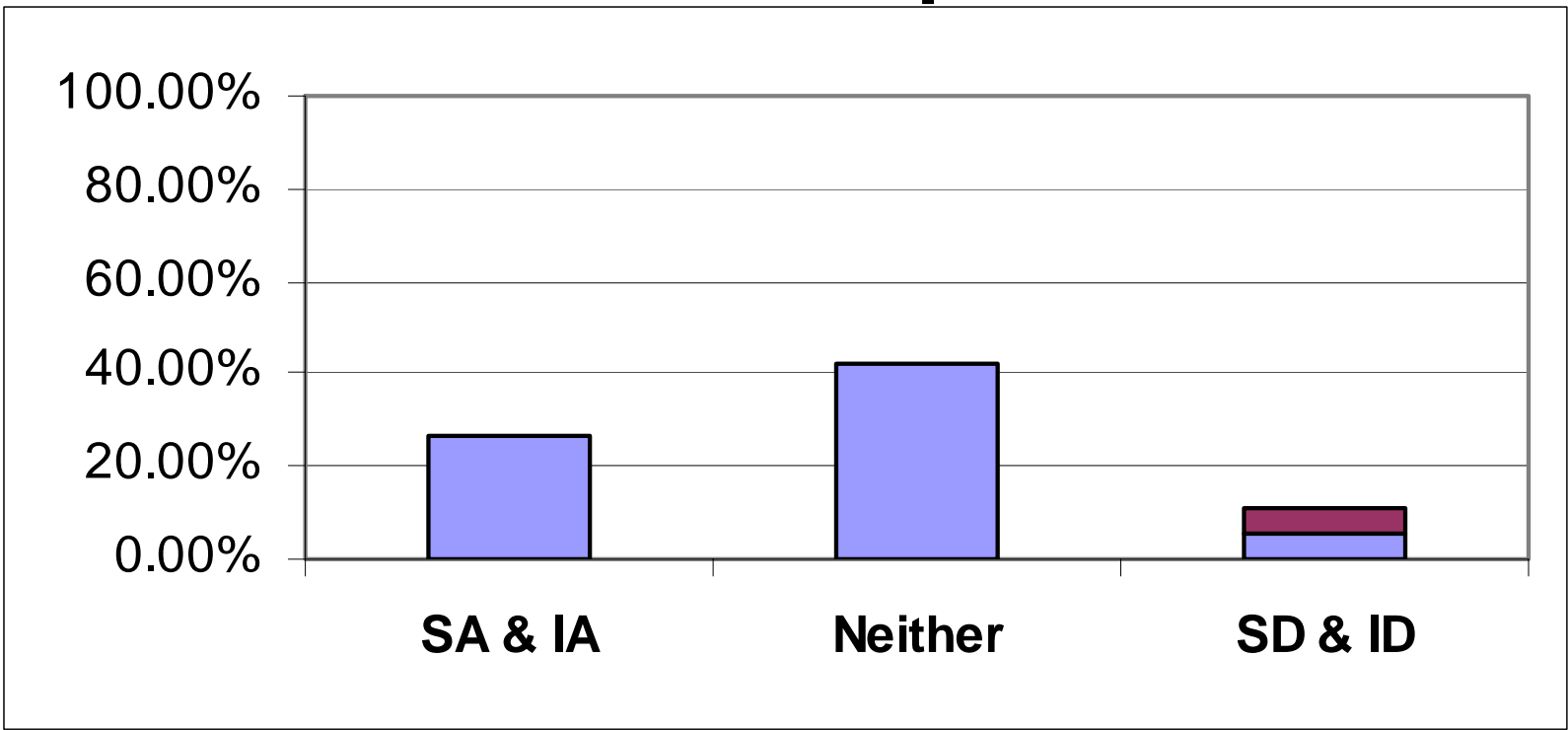

N = 16, 3 'no responses'

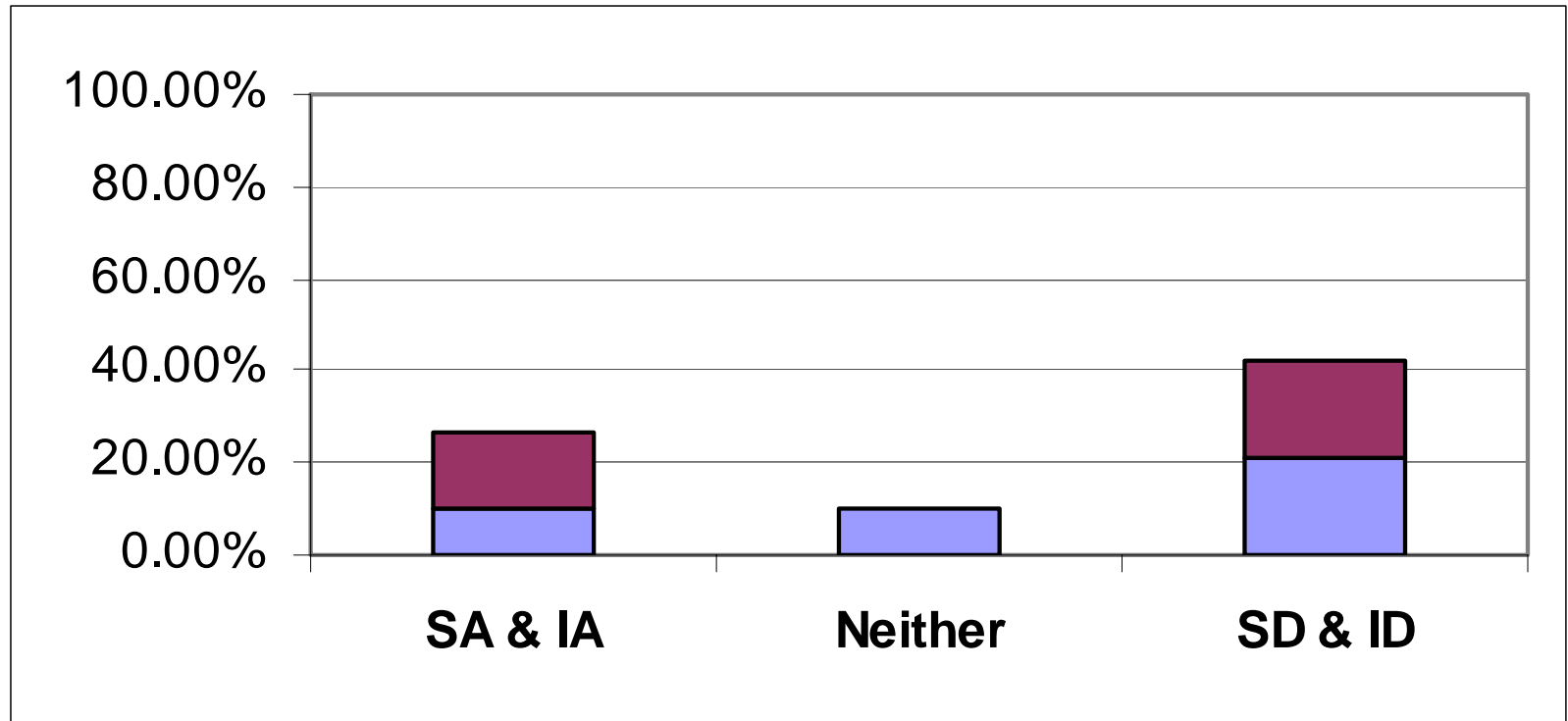SA = 1, IA = 7, Neither = 7, IA = 0, SD = 1

NPHPS3: NPHPS for LPHDs Should Be Incorporated into the Accreditation Program in a Subsequent Cycle- **Reviewers' Responses**

N = 15, 4 "no responses"

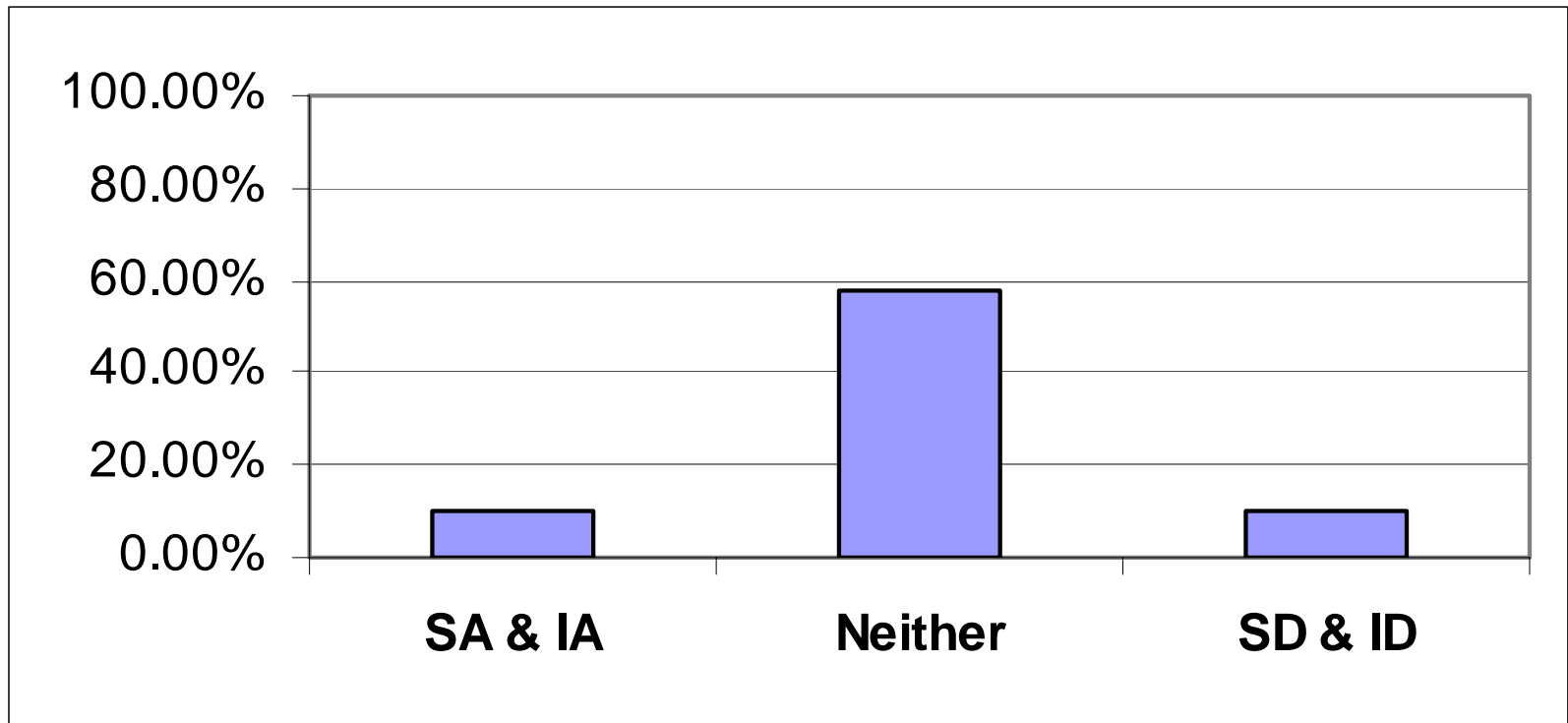SA = 0, IA = 5, Neither = 8, ID = 1, SD = 1

MD1: I am familiar with the indicators that address medical directors-
Reviewers' Responses

N = 15, 4 'no responses'

SA = 3, IA = 2, Neither = 2, ID = 4, SD = 4

MD2: Indicators in the Administration Section of the Accreditation Tool are Sufficient to Address Medical Director Competencies- **Reviewers' Responses**

N = 15, 4 'no responses'

SA = 0, IA = 2, Neither = 11, ID = 2, SD = 0